



# California's HMO Guide

Getting  
the Most  
from Your  
HMO



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OFFICE OF THE PATIENT ADVOCATE

**What HMO members  
have to say about  
*California's HMO Guide*:**

“This gives you a license to say, I am in charge of my health and when I ask questions I need answers.”

“I was amazed at how much information is in here that you can utilize right now.”

“I don't feel lost anymore. In the past I have felt intimidated, but now have learned to ask questions.”



*The University of California, Berkeley*



*Office of the Patient Advocate*

*California's HMO Guide* is produced by the University of California, Berkeley, in collaboration with the California Office of the Patient Advocate and communities throughout California.

The people of California deserve the highest quality care from their HMOs. *California's HMO Guide* helps you and your family get the care you need and expect.

Governor Gray Davis  
State of California

Getting the best health care you can means knowing your rights and responsibilities. I hope this guide will be a useful tool for making important health care decisions.

Secretary Maria Contreras-Sweet  
Business, Transportation & Housing  
Agency

**To order a free copy of  
*California's HMO Guide*  
in English or Spanish, call:  
**1-866-466-8900****

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**C**alifornia's *HMO Guide* is a tool to help you use your HMO (health maintenance organization). This guide has answers to many common questions. It does not offer legal advice, but it will tell you about your rights. It will tell you some places you can go to find more help and to learn more about your rights.

When you use this guide, remember that each HMO is different. Call your HMO to learn more about its rules and the care it offers. See page 60 for phone numbers for most California HMOs.



### Your Health Care Rights

- To be treated with courtesy and respect.
- To get health care without having to wait too long.
- To get an appointment when you need one.
- To get care from qualified medical staff.
- To see a specialist when you need to.
- To choose a doctor you trust.
- To understand your health problem and the risks and benefits of treatments.
- To get a second opinion about a health problem.
- To choose or refuse treatment.
- To know how your health plan works.
- To appeal a decision your HMO made about your care.
- To see and get a copy of your health care records.



# Useful Terms

## Your Responsibilities—

Tips to help you get good care and stay healthy

### Read and understand your health plan's Evidence of Coverage (EOC)

Know what your plan covers, and what it doesn't cover. To get a copy or ask questions about the EOC, call your HMO.

### Tell your doctor all your health care concerns

Ask questions if you are not clear about your health problem or treatment plan.

### Know how to contact your HMO

Keep your membership card handy. Your HMO's Member Services phone number is on the card.

### Keep good records

Keep records of your health care in one place. Include test results and treatment information.

### Make healthy lifestyle choices

HMOs offer many services to help you stay well, from health education to well-child care. Use these services.

### benefits package

The services covered by your health insurance

### COBRA/Cal-COBRA

Laws that help employees keep their group health insurance if their job ends or their hours are cut

### copayment/copay

A fee that you pay for each doctor visit or prescription

### covered benefit

A service your HMO will pay for if you need it

### deductible

The amount you pay before your insurance starts to pay

### Evidence of Coverage (EOC)

Your contract with your HMO. The EOC tells you what your HMO will and will not pay for

### formulary

A list of the prescription drugs covered by your HMO

### group coverage

Health insurance you get through a group, like your company or union

### HMO (health maintenance organization)

A kind of health insurance in which you must get your services from the doctors, labs and hospitals that have contracts with the HMO or work for it

### Medical Group

A group of doctors who have a business together and have a contract with an HMO to provide services to HMO members

### network

All the doctors, labs and hospitals that have contracts with your HMO or work for it

### premium

A monthly fee that you, the company you work for and/or the government pays to your HMO

### primary care provider (PCP)

Your main doctor, who provides most of your care and coordinates your other health care services

### provider

Any person, clinic or group that provides your health care services

### service area

The area an HMO serves

### specialist

A doctor with extra training in a special field, like children's health, cancer treatment or health care for seniors

## Questions & Answers

### Q: Why do I need health insurance?

**A:** Insurance costs a lot, but if you don't have it, one accident or serious illness could leave you in debt.

### Q: Can I keep my old doctor if I join an HMO?

**A:** Only if your doctor belongs to the HMO's network. Otherwise you must choose a new doctor in the HMO's network. See page 20.

### Q: Will I be able to see a specialist if I need one?

**A:** Yes, but you will have to follow your HMO's referral guidelines. Usually you must see a specialist in the HMO's network. See page 36.

### Q: Can I keep my HMO if I move to another city?

**A:** It depends on your HMO's service area. This is the specific area your HMO serves. If you are outside that area, only emergency or urgent care is covered. See page 42. HMOs can change areas. They can move into or out of the area where you live.

**M**ost people in California belong to a health maintenance organization—an HMO. Like other kinds of health insurance, HMOs have guidelines for getting services. This guide can help you learn about these guidelines and get the services you need.

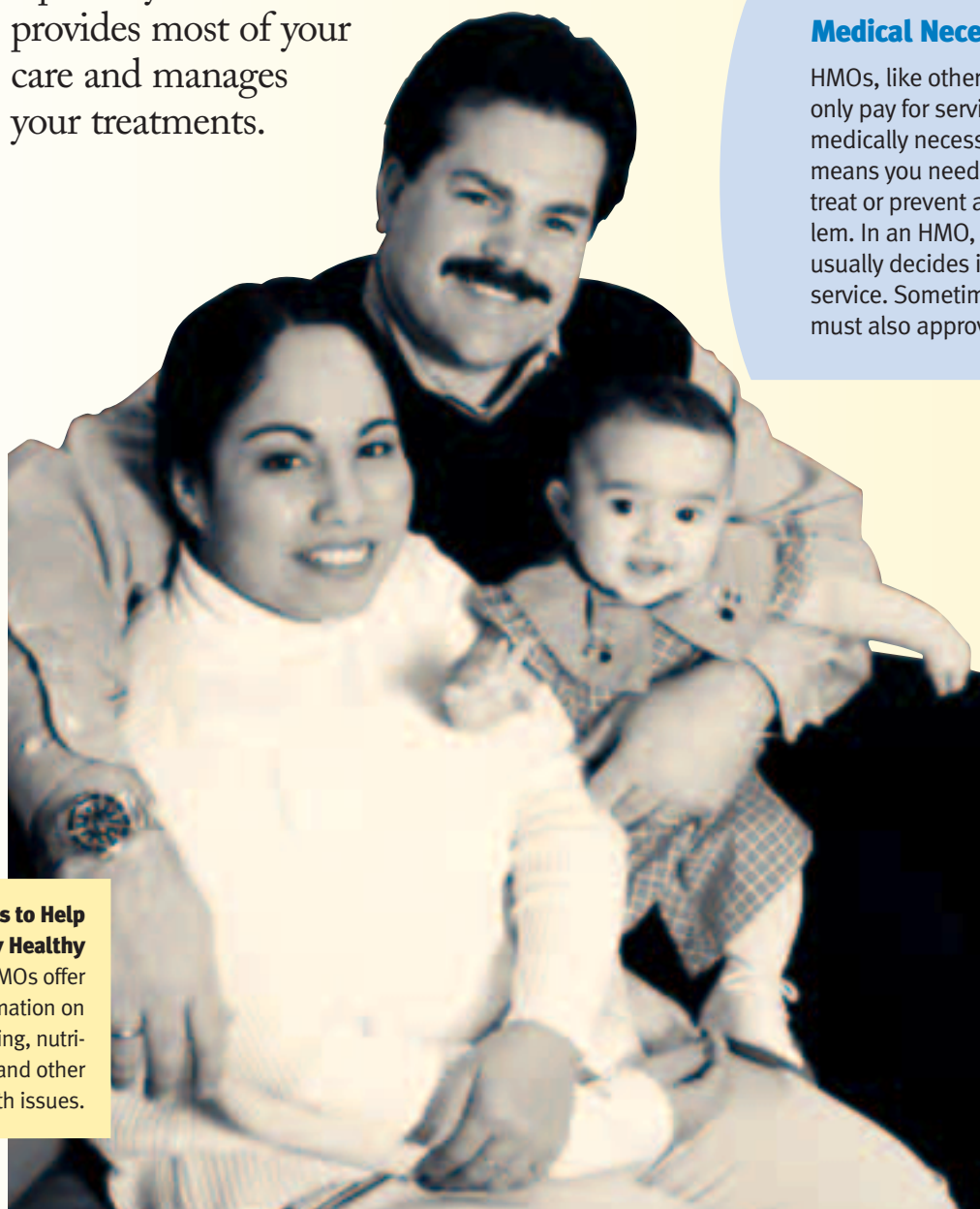
HMOs differ from most other kinds of health insurance in several ways. Each HMO has a network of doctors, labs, hospitals and other providers that work for the HMO or have a contract with it. You get your health care services from the providers in this network. And usually you have a primary care doctor who provides most of your care and manages your treatments.

## Medical Necessity

HMOs, like other health plans, only pay for services that are medically necessary. This means you need the service to treat or prevent a health problem. In an HMO, your doctor usually decides if you need a service. Sometimes your HMO must also approve the service.

## Services to Help You Stay Healthy

Many HMOs offer information on parenting, nutrition and other health issues.



## things you can do

### If You Have Health Insurance Through Your Job

- Most people get health insurance through their job. Insurance you get through a job is called group coverage.
- Ask for information about all the plans your employer offers. The plans can change from year to year. The benefits and fees in each plan can also change.
- Your dependents, such as your spouse, domestic partner or children, may also get insurance through your job. If they are no longer your dependents or your insurance changes, their insurance changes, too. See page 12.

### There Are Different Kinds of HMOs

- Most HMOs have contracts with many doctors and hospitals. One doctor may belong to several HMO networks.
- In some HMOs, the providers work for the HMO and all their patients belong to that HMO.
- For information on Medi-Cal HMOs, see page 16.
- For information on Medicare HMOs, see page 18.
- For low-cost HMOs for women and children, see page 34.
- For general information on HMOs, visit [www.opa.ca.gov](http://www.opa.ca.gov).

### Help with Your Health Plan

- If you have a question or a problem, first call your HMO's **Member Services**. Find the number on your membership card or on page 60.
- If you have a problem and you and your HMO can't agree how to solve it, see page 48 or call **HMO Help Center**.
- If your health plan is not an HMO, you can get help from **Department of Insurance**.

### Tom Likes His HMO

"I know where to go and what to expect." But Ed disagrees, "My new plan is an HMO. I had to change doctors, and it's harder to see specialists."

### HMOs Limit Which Doctors You Can See

Usually, an HMO pays only for services you get from the doctors, hospitals and other providers in its network. Ask for a list of your HMO's providers.

## where to find help

### Department of Insurance

Information and help for consumers

**1-800-927-4357**

[www.insurance.ca.gov](http://www.insurance.ca.gov)

### HMO Help Center

Help for California HMO members

**1-888-HMO-2219**

[www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)

### Member Services

To find your HMO's phone number, see page 60

### Office of the Patient Advocate

Report cards with information on California HMOs

**1-866-466-8900**

[www.opa.ca.gov](http://www.opa.ca.gov)

### Notes:



## Questions & Answers

### Q: Am I the only one who thinks HMOs are confusing?

**A:** No. Learning to use the HMO system can be hard. This guide can help you.

### Q: Does it help to speak up about a problem?

**A:** Yes. Studies have shown that hospital patients who complain and demand better care really do get better care. They also recover faster.

### Q: How do I know what rights I have?

**A:** You can learn about your rights in this guide. The more you know about your rights, the more likely you are to get what you need. Also visit [www.hmohelp.ca.gov](http://www.hmohelp.ca.gov) or [www.calpatientguide.org](http://www.calpatientguide.org).

**M**aking health care decisions can be hard—whether you are choosing an HMO, finding a doctor or deciding about treatments. If you know what your choices are and know what you need, you will probably get better care.

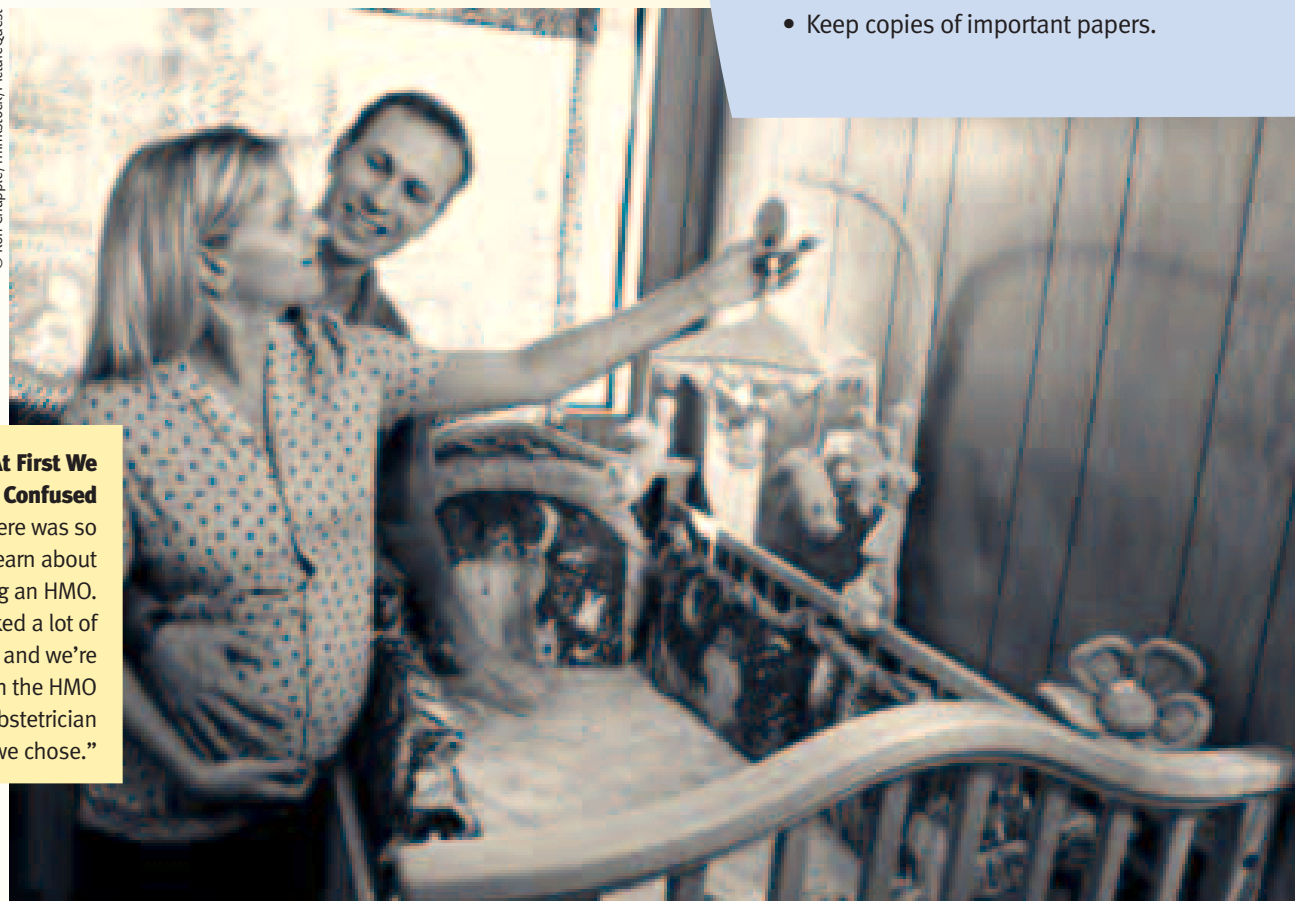
The information in this book can help you make better decisions. You can also talk to your doctor and other health care providers. And you can find more information in the library, on the Internet and at your HMO's health education office.

If you are informed and speak up for your needs, you and your family will be able to make the most of the services your HMO offers.

## Take Charge— When You Need Information

- Make a list of your questions.
- Keep asking questions until you get the information you need.
- Take notes.
- Get the name of the person you are talking to.
- For extra support, have a friend or relative with you.
- If you can't get an answer to your question, ask whom to call or ask to speak to a supervisor.
- Keep copies of important papers.

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### At First We Were Confused

"There was so much to learn about choosing an HMO. But we asked a lot of questions, and we're happy with the HMO and the obstetrician we chose."





© Joe Patronite/Gettyimages/The Image Bank

**It's Your Choice**

Lia and her doctor talked about all the things she could do to manage her high blood pressure. Then she chose what would work best for her.

## Take Charge— When You Need Treatment

Before you or your children get medical treatment, you will be asked to sign a consent form. Before you sign, make sure you understand what is being done and why. Ask about risks, benefits and other treatments. Don't decide on treatments when you are stressed, sleepy or taking drugs for pain. See page 24.

## things you can do

**Get to Know Your HMO**

- Carry your HMO membership card with you at all times.
- Know what your HMO will pay for. See page 30.
- Know what to do if you have a problem. See page 48.

**You Have the Right to See and Copy Your Medical Records**

- Ask your doctor's office how to see your records. It may take a few days.
- It's a good idea to ask for a copy of your medical records, in case you change doctors or HMOs. It can take about a week to get your copy. There may be a fee.
- In most cases, your records are private. No one can see them unless you say they can.
- If you don't agree with something in your records, call your **Member Services**. Visit [www.calpatientguide.org](http://www.calpatientguide.org).

**Keep All Your Records in One Place**

- Save your lab reports and vaccination records.
- Save copies of test results and treatment information.
- Save copies of medical bills.
- Save copies of any letters you send to your HMO.
- Save information your HMO sends you about its services.

**Protect Your Wishes**

You can choose someone to decide about your health care if you cannot. You can also choose what treatments you want or don't want. To do this, fill out a form called an Advance Health Care Directive. Give a copy to your doctor. See page 47. To get a form, call **California Healthcare Association**.

## where to find help

**California Healthcare Association**

Free Advance Health Care Directive forms

**1-800-494-2001**

[www.calhealth.org](http://www.calhealth.org)

**California Patient's Guide**

A guide to health care rights

[www.calpatientguide.org](http://www.calpatientguide.org)

**HMO Help Center**

Help for California HMO members

**1-888-HMO-2219**

[www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)

**Member Services**

To find your HMO's phone number, see page 60

**Notes:**

# Choosing an HMO

## Questions & Answers

**Q: My job offers only one plan, but I'm not happy with it. What can I do?**

**A:** Many jobs offer only one plan. Talk to your employer about changing to a better plan. Or ask if your employer will help pay for insurance you buy on your own.

**Q: We're planning to have a baby. What should we look for in an HMO?**

**A:** Ask about pregnancy and well-baby care and what it will cost to insure your child. Ask other new parents what plans they like. See page 34.

**Q: Our son has asthma. What questions do we need to ask?**

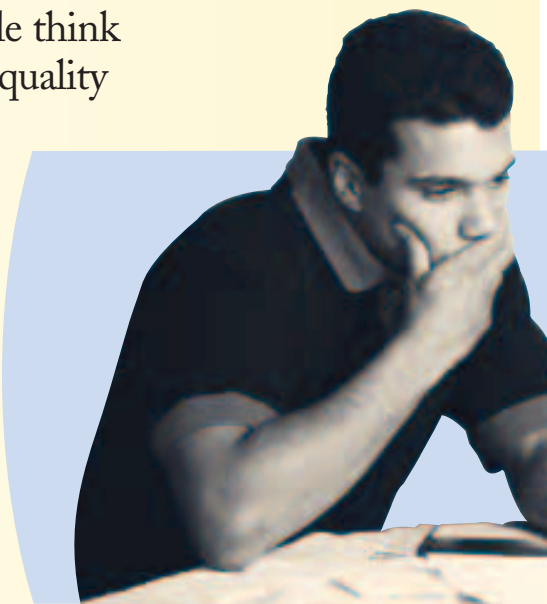
**A:** Ask the plan about specialists for children. Ask if the medicines your son needs are covered. See page 14 for information about protecting your son's coverage.

**Q: What if my HMO goes bankrupt or leaves my area?**

**A:** Your HMO must help you get the care you need if you are in the middle of treatment or are pregnant. However, you will have to start looking for a new plan. You may need to find a new doctor. If you have a problem, see page 50.

**N**ot all HMOs are the same. Before you choose an HMO, find out what other people think about it. Health plans differ in cost, quality and benefits.

Your benefits package is all the services that your health plan covers. All plans offer basic benefits, like checkups, routine tests, specialist care, and hospital and emergency care. Other benefits, like prescription drugs and substance abuse treatment, may differ from plan to plan. When you choose a plan, make sure it has the benefits you need.

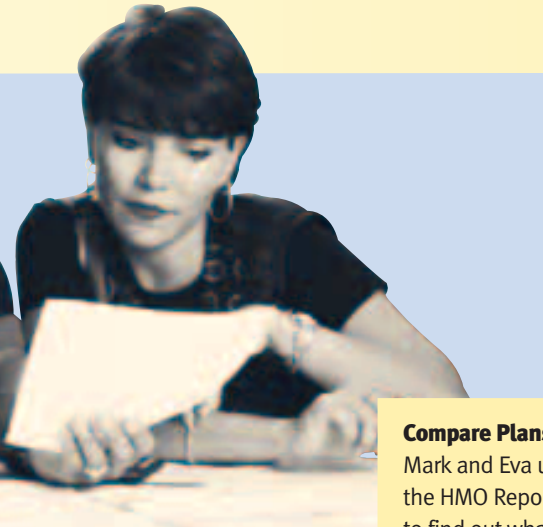


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**We Wanted to Stay with Our Doctor**

"So we chose an HMO she worked in."



© Ron Chapple/Getty Images/ixi

### Compare Plans

Mark and Eva used the HMO Report Card to find out what people said about their HMOs. You can view it at [www.opa.ca.gov](http://www.opa.ca.gov).

## You Can Compare Plans

Plans differ in many ways, though all plans regulated by the State of California offer the same basic benefits.

- To compare California HMOs, visit [www.opa.ca.gov](http://www.opa.ca.gov).
- To compare Medicare HMOs, call **Cal Medicare**.
- To compare Medi-Cal HMOs, call **Health Care Options**.
- For more information on choosing a plan, call **National Committee for Quality Assurance**.

## things you can do

### You Can Change Plans During Open Enrollment

- Most employers have Open Enrollment in the Fall of each year. This is when you can change plans. Make sure you meet the deadline for Open Enrollment.
- You can add new dependents to your plan when you marry, have a baby or adopt a child. You may also be able to change plans. Talk to your employer.
- If you are starting a new job, ask how soon you can get health coverage and when you need to sign up.

### Before You Choose a Plan, Ask

- Are people I know happy with the plan?
- Can I find a doctor I like?
- Does the HMO pay for the services I need? See page 30.
- What do I have to do to get the services I need?
- How much will I have to pay? See page 10.
- How much will it cost to cover my dependents?
- Does the HMO pay for the prescriptions and equipment I need, including brand-name as well as generic drugs?
- Will I be able to see the specialists I need?
- Is the hospital nearby?
- Can I get a doctor who speaks my language?

### Compare Costs and Benefits

When you compare plans, look at the costs and benefits. The plan that looks the cheapest can cost you more if it doesn't cover the services you need most.

## where to find help

### Cal Medicare (California HealthCare Foundation)

Printed information on Medicare HMOs

**1-888-430-2423**

[www.calmedicare.org](http://www.calmedicare.org)

### Health Care Options

Information on Medi-Cal HMOs

**1-800-430-4263**

### National Committee for Quality Assurance

Information on quality health care and HMO standards

**1-800-839-6487**

[www.ncqa.org](http://www.ncqa.org)

### Office of the Patient Advocate

Report cards with information on California HMOs

**1-866-466-8900**

[www.opa.ca.gov](http://www.opa.ca.gov)

Notes:



### Questions & Answers

**Q: My boss says an HMO is all he can afford to offer. Do HMOs cost less than other plans?**

**A:** Usually HMOs cost less. One reason is that the doctors and other providers in the HMO's network limit what they charge the HMO for their services.

**Q: My employer pays for my insurance. How can I find out what it costs?**

**A:** Ask your employer or HMO. Or look on your paycheck stub.

**Q: My health care costs keep rising. When will this stop?**

**A:** Costs will probably go on rising. Your employer makes new contracts with plans each year, to get the best benefits at the lowest cost. Let your employer know what benefits you want and what you are willing to pay.

**Q: What if I get a bill from my doctor?**

**A:** Providers in your HMO's network are not allowed to bill you for their services. If your letter says, "This is not a bill," you don't have to pay anything. If you get a bill, don't pay it. Call **Member Services**.

The cost of health care in an HMO is usually less than the cost in other health plans. In an HMO, there is a monthly fee called a premium. There are also fees, called copays, for doctor visits and prescription drugs. There may also be limits on how much your HMO will pay for drugs and other services. Try to avoid surprises. Learn about your HMO's fees before you need services.

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**When You're on a Trip**  
Know your HMO's rules for getting care outside its service area. Take your membership cards with you.



### If Your Child Is Sick

If it's not an emergency, visit your doctor instead of an emergency room. The copayment is a lot less.

## Avoid Costly Surprises

You may have to pay the bill if

- You get services that are not part of your benefits package. See page 31.
- You see a specialist without a referral from your doctor.
- You see a provider who is not in your HMO's network before your HMO approves the visit, unless it's an emergency.
- You go to an emergency room for non-emergency care. See page 42.
- You get care outside your HMO's service area, unless it's an emergency.

## things you can do

### Keep Your Costs Down

- Learn about your benefits—know what your HMO does and does not pay for. See page 30.
- Know your copays. The copay for an office visit is usually under \$20, but some HMOs charge as much as \$400 a day for hospital stays.
- Know your HMO's rules for getting care outside its service area. If you can, call your HMO before you get care. See page 42.
- A few plans divide their network into levels, and charge a higher copay for some levels. If your HMO has levels, you can save money by using providers in the level with the lowest copay.

### If You Have a Problem with a Bill You Get

- Call your **Member Services** to make sure there's no mistake.
- If you still have a problem, you can file a complaint with your HMO. See page 48.
- If your HMO won't pay for emergency or urgent care you received, see page 52. Or call the **HMO Help Center**.
- Keep copies of any bills you pay, in case you have a problem or need them for your tax return.

### Prescription Drug Costs

Prescription drugs can cost a lot, even if you have prescription drug benefits. When you choose an HMO, compare drug benefits carefully. Even though you have to pay a higher monthly premium, you may save money if the plan covers the drugs you need. See page 38.

### If You Can't Afford Health Insurance

- For low-cost health care for children and pregnant women, see pages 16 and 34.
- For low-cost or free health care, see page 16.

## where to find help

### HMO Help Center

Help for California HMO members

**1-888-HMO-2219**

**[www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)**

### Member Services

To find your HMO's phone number, see page 60

### Notes:

## Questions & Answers

### Q: Why should I keep my employer's plan?

**A:** It may cost less than getting insurance on your own. Prescription drug benefits are often better. And if you have an ongoing health problem, you may find it hard to get insurance on your own.

### Q: I can't afford COBRA. What can I do?

**A:** For information on low-cost health care, see pages 16 and 34. You can also ask your HMO about other benefit packages. You may be able to get a package that costs less because it has fewer benefits.

### Q: I'm retiring but I'm only 60. Can I get COBRA?

**A:** Yes, and you may be able to get Senior COBRA after you use up COBRA. Senior COBRA can last until you are 65 or get Medicare. To get Senior COBRA, you must be at least 60 and you must have worked at your job for at least 5 years. Call a benefits counselor at **HICAP**.

**I**f you quit or lose your job or your hours are cut, find out about COBRA. This is a law that helps you keep your employer's health plan for 36 months.

If you keep your plan through COBRA, you will have to pay all of the premium. But it may cost less than insurance you buy on your own. And the benefits may be better.

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## Protection for Family Members

COBRA can help your spouse, former spouse, widow or child keep health insurance after your job ends, or after your divorce or death. A child who turns 21 and will no longer be your dependent can also get COBRA for 36 months.

### COBRA Protects Your Dependents

"Elena is 21 now, but we're keeping her insured through COBRA until she finds a job."

© Phillip Spears/GettyImages/PhotoDisc



#### COBRA Protects You Between Jobs

When Jim was laid off, he used COBRA. “It was hard to come up with the money, but I was glad I did. I broke my leg and really needed the health care.”

### How to Get COBRA

You have 63 days after your job ends to apply for COBRA and pay your first month’s premium. To apply you have to fill out a form that says you want COBRA. If you don’t get your application form or you have questions, call your **Member Services** or talk to your employer. Or call **U.S. Department of Labor**. If you work for a small company, with 2 to 19 employees, call **HMO Help Center**.

## things you can do

### Questions About COBRA, Cal-COBRA and Senior COBRA?

- COBRA is a federal law. It applies to most employers with at least 20 employees. If you have questions about it, call **U.S. Department of Labor**.
- Cal-COBRA is California’s COBRA for businesses with 2 to 19 employees. For more information, call **HMO Help Center**.
- Cal-COBRA also helps people keep coverage when COBRA runs out. For more information, call **HMO Help Center**.
- For more information about Senior COBRA, call **HICAP**.

### Keeping Your Employer’s Health Insurance

- Ask your HMO or employer about COBRA if your job is ending or your hours are being cut.
- Make sure you meet the deadlines for signing up for COBRA, Cal-COBRA or Senior COBRA.
- Pay your premiums on time or you will lose your coverage.
- If you move out of your HMO’s service area or your former employer stops offering health insurance, you will lose your COBRA or Senior COBRA.
- If you qualify as disabled during the first 2 months you’re on COBRA, some of the COBRA rules are different. Call **U.S. Department of Labor**.

### Getting Insurance on Your Own

Compare the cost of using COBRA to buying a health plan on your own. If you know your insurance will end, shop around now. Compare benefit packages and costs. For more information on getting insurance on your own, see the next chapter.

## where to find help

### HICAP (Health Insurance Counseling & Advocacy Program)

Information about Senior COBRA

**1-800-434-0222**

### HMO Help Center

Information about Cal-COBRA

**1-888-HMO-2219**

[www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)

### Member Services

To find your HMO’s phone number, see page 60

### U.S. Department of Labor

Information about COBRA and HIPAA

**1-866-444-3272**

[www.dol.gov/ebsa](http://www.dol.gov/ebsa)

### Notes:

### Questions & Answers

#### Q: What is a gap in coverage?

**A:** It's 63 or more days in a row without health insurance. If a gap is shorter than 63 days, it's easier to get care for pre-existing health problems.

#### Q: If I'm pregnant when I join a plan, will I be covered?

**A:** You'll be covered if you join a group plan. But a plan you buy on your own may not cover services for this pregnancy.

#### Q: I have an old injury. Will I have to wait to get care in my new plan?

**A:** Ask your new employer or your new plan. Not all plans have waiting periods. A group plan can't make you wait if you haven't had care for your injury in the last 6 months.

#### Q: Can my employer's plan charge me more if I have HIV?

**A:** No, your employer's plan cannot charge you more. Call **California AIDS Hotline**.

**Y**ou may have diabetes, a bad back or other health problem that needs care. If you have a health problem or condition like this, be extra careful when your insurance ends or changes. Your new insurance company may say that you have a pre-existing condition.

Your employer's plan cannot refuse to insure you if you have a pre-existing condition. However, it may not cover services for your condition right away. And you may find it hard to buy health insurance on your own.

It is easier to get new insurance if you sign up less than 63 days after your old insurance ends. COBRA can help you keep your old insurance until you get a new plan. See page 12.



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#### **Andy Has Cerebral Palsy**

"When I changed jobs I made sure to keep our insurance through COBRA, so there was no gap in coverage."





© Adam Crowley/Getty Images/PhotoDisc

### You May Have to Wait for Care

Joe needed knee surgery. "I didn't have insurance for 3 years. Now I have it, but I'll have to wait 6 months before I can get the surgery."

### When You Start a New Job

The group plan at your new job may have a waiting period before it will cover a pre-existing health problem. You can shorten or avoid this waiting period if you have had 3 to 12 months of coverage with no gaps. Call **U.S. Department of Labor**. Visit [www.dol.gov/ebsa](http://www.dol.gov/ebsa).

## things you can do

### Avoid Gaps in Your Coverage

- If your insurance ends, try to sign up for a new plan within 63 days.
- Look for new insurance as soon as you know you will have to change plans. It can take 30 days or more from the time you apply until the time you are approved.
- When your insurance ends, get a letter from your HMO that says how long you were insured. This is called a Letter of Creditable Coverage. Keep it in case you need it when you apply for health insurance.

### If You Have Medi-Cal or Medicare

A Medi-Cal or Medicare HMO will not limit your care for pre-existing health problems. See pages 16 and 18.

### To Get Insurance on Your Own

- A law called HIPAA protects your rights to get insurance on your own. It protects coverage for a pre-existing condition. The law limits how much a plan can charge you. Call **Department of Insurance** or visit <http://cms.hhs.gov>.
- Use up your COBRA first and apply for HIPAA individual coverage within 60 days of the date your COBRA ends. You must have coverage without a gap for the last 18 months.
- If you are denied care because of a pre-existing condition, find out about your rights. See page 27 or visit [www.calpatientguide.org](http://www.calpatientguide.org).

## where to find help

### California AIDS Hotline

Information on HIV/AIDS services

**1-800-367-2437** [www.sfaf.org](http://www.sfaf.org)

### California Patient's Guide

A guide to health care rights [www.calpatientguide.org](http://www.calpatientguide.org)

### Centers for Medicare & Medicaid Services

Information on HIPAA

**1-877-267-2323** <http://cms.hhs.gov>

### Department of Insurance

Information and help for consumers

**1-800-927-4357** [www.insurance.ca.gov](http://www.insurance.ca.gov)

### U.S. Department of Labor

Information about COBRA and HIPAA

**1-866-444-3272** [www.dol.gov/ebsa](http://www.dol.gov/ebsa)

## Questions & Answers

### Q: How do I get Medi-Cal?

**A:** There are many ways to qualify. Call your county Social Services office for information. Both your income and your medical need are looked at.

### Q: I am pregnant and need Medi-Cal. How soon can I get it?

**A:** You can get it right away. Apply now.

### Q: How do I get family planning services?

**A:** You can visit any doctor or clinic in your HMO that has family planning services. You don't need to get a referral from your doctor.

### Q: Can I stay with my current doctor? He's been treating my diabetes for 2 years.

**A:** You may be able to stay with your doctor. Call **Health Care Options**.

### Q: Can I switch my Medi-Cal HMO?

**A:** Yes, if your county has more than one plan.

### Q: What if my Medi-Cal is cancelled?

**A:** There may be a problem with the way you qualify. Call your social worker or **Medi-Cal Managed Care Ombudsman**.

**M**any people with Medi-Cal belong to Medi-Cal HMOs. Like other HMOs, Medi-Cal HMOs have networks of doctors, pharmacies, clinics, labs and hospitals. You use these providers when you need health care services.

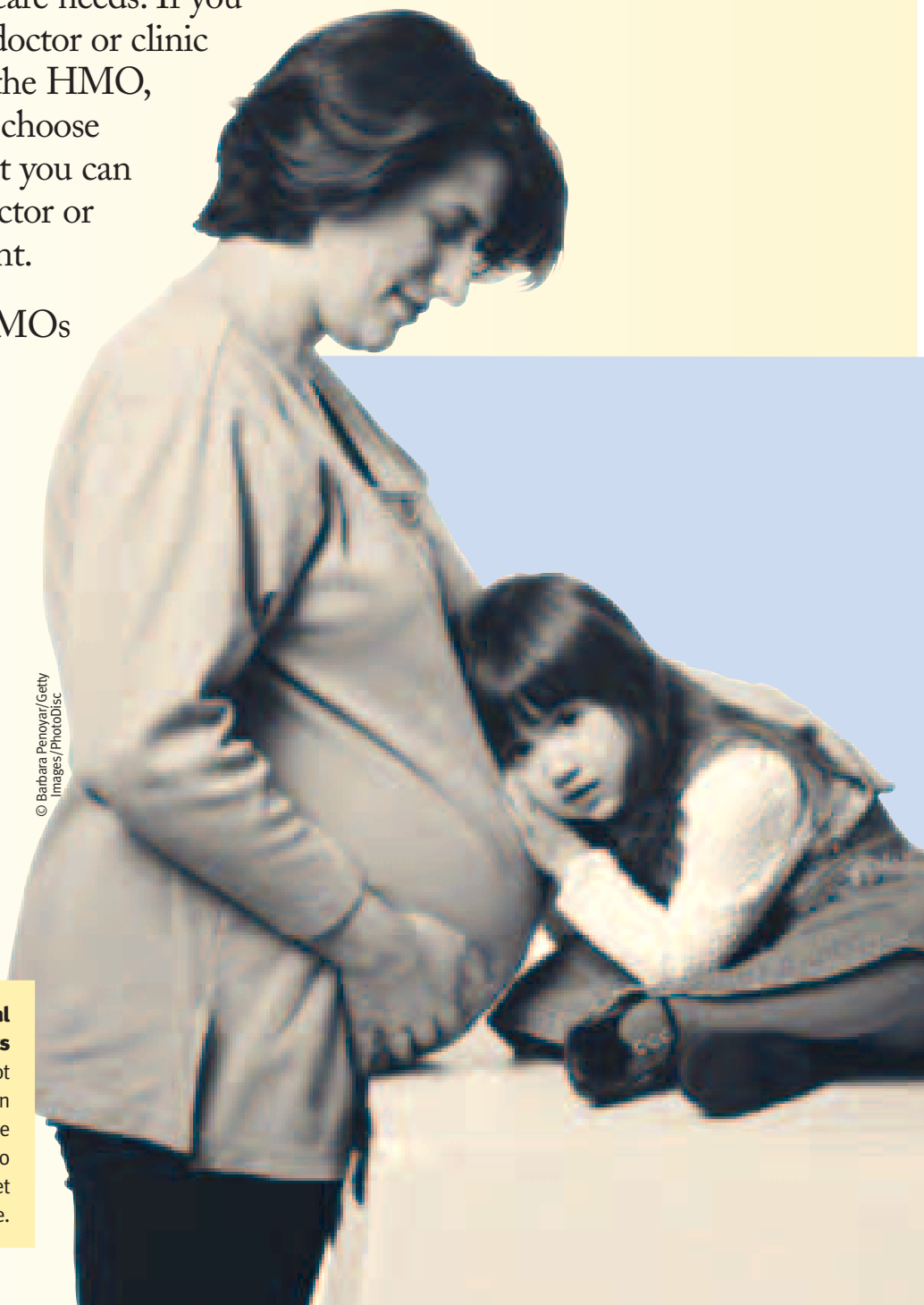
You will have one doctor or clinic that you go to first for all your health care needs. If you don't choose a doctor or clinic when you join the HMO, the HMO will choose one for you. But you can change your doctor or clinic if you want.

Medi-Cal HMOs provide many services to help members stay healthy. They also have interpreter services for all members with limited English.

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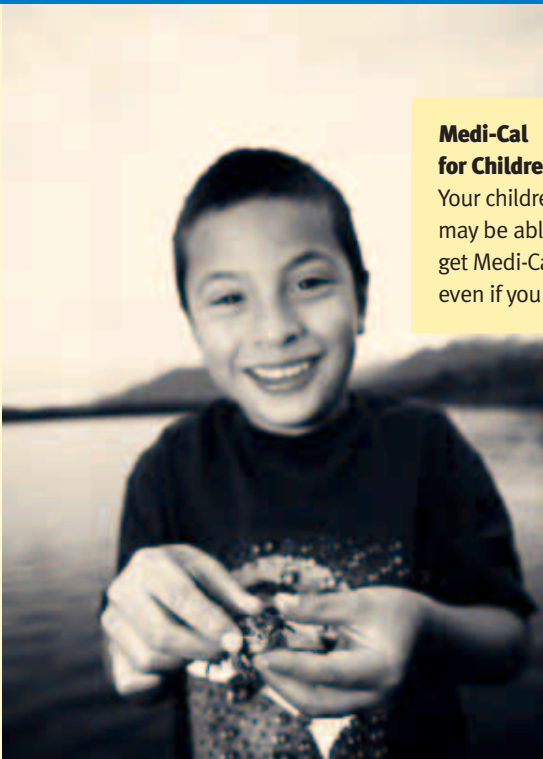
#### Medi-Cal for Mothers

Monica got Medi-Cal as soon as she knew she was pregnant so she could get prenatal care.



**Medi-Cal  
for Children**

Your children  
may be able to  
get Medi-Cal,  
even if you can't.



© Roy Corral/Getty Images/Stone

### Medi-Cal Offers These Services for Adults and Children

- Doctor services
- Preventive care, like exams and shots
- Health education
- Hospital care
- Family planning
- STD tests and treatment
- Pregnancy tests and care
- Prescription drugs
- Vision and hearing care
- Emergency and urgent care
- Lab work, like blood tests
- X-rays and mammograms
- Physical therapy
- Chiropractic care
- Foot care
- Dental care

## things you can do

### To Enroll in Medi-Cal

- Pick up an application form at your county Social Services office or at a hospital, clinic or school.
- If there is more than one plan in your county, you can choose which plan to join. If you do not choose within 30 days, the county will choose a plan for you.

### If You Have a Complaint

- You can file a complaint with your HMO. Call your HMO **Member Services**. See page 48.
- If you have a problem switching doctors, call your HMO **Member Services**.
- If your HMO says you cannot get the services you feel you need, call **Medi-Cal Fair Hearing**.
- If you have a complaint about a provider or the quality of your care, call **Medi-Cal Managed Care Ombudsman**.

### If You Have a Serious Health Problem

You may not need to join an HMO. If you do join one, you may be able to see a specialist who is not in your Medi-Cal HMO. Call **Health Care Options**. If you have HIV, you have the right to see an HIV specialist.

### Mental Health Care

If you belong to a Medi-Cal HMO and need mental health care, call your County Mental Health Agency or **Medi-Cal Mental Health Care Ombudsman**. See page 40.

## where to find help

### Health Care Options

Join or leave a Medi-Cal HMO

**1-800-430-4263**

### Medi-Cal Fair Hearing

File an appeal if your HMO denies you the services you need

**1-800-952-5253**

### Medi-Cal Managed Care Ombudsman

Help if you have a problem you can't solve with your HMO

**1-888-452-8609**

### Medi-Cal Mental Health Care Ombudsman

Help with Medi-Cal mental health care services

**1-800-896-4042**

### Member Services

To find your HMO's phone number, see page 60

### Notes:



## Questions & Answers

**Q: If I join a Medicare HMO, will I have the same benefits I have in traditional Medicare?**

**A:** Yes. The HMO must cover the services covered by Medicare Parts A and B.

**Q: Can I change my HMO?**

**A:** Yes, you can change if there is more than one Medicare HMO in your area.

**Q: My HMO is leaving my area. What can I do?**

**A:** You can join another Medicare HMO. Or you can return to traditional Medicare and get a Medigap plan to cover services Medicare doesn't cover. Call **HICAP**.

**Q: My wife has had hip surgery and doesn't feel ready to come home. What can I do?**

**A:** Ask the hospital social worker about the home care your wife will need. And you can call **California Medical Review** right away and ask about keeping your wife in the hospital longer.

**Q: I have retirement health benefits. Will I need Medicare?**

**A:** Yes. Ask how the employee plans work with Medicare.

**M**ost seniors and some younger people with disabilities get Medicare. Medicare is health insurance sponsored by the government. Many people in Medicare get their care through HMOs. The government pays your Medicare HMO a fixed amount each month. Usually, you still pay a monthly premium for your share of Medicare Part B.

In most ways, Medicare HMOs are like other HMOs. You must use the providers in the plan's network, and the plan or your doctor must approve most services before you get them. When you have a problem, you have the right to file a complaint and ask for a review of your HMO's decisions.

A Medicare HMO may cost you less or offer more benefits than traditional Medicare. When you are deciding how to get your Medicare, you should look at all your choices.

### Learning to Use an HMO

"We joined a Medicare HMO because we didn't want to deal with a lot of paperwork. But it took us a while to find doctors and learn how to get services."



© David Young-Wolff/Getty Images/Stone



## Your Medicare HMO Costs May Include

- A monthly premium
- Copays for doctor's visits, hospital stays, prescription drugs and some other services
- Additional costs for some services.

Medicare HMOs can change fees and benefits once a year. They must notify you, so that you can change plans if you want to.

## If You Have a Problem

- Talk to your doctor and HMO.
- Call **HICAP** for more help.
- You can file a complaint, or "grievance," with your HMO. See page 48.
- If your HMO says you cannot get a service you think you need, you can ask for a review or "reconsideration."
- If your problem is urgent, ask for an Expedited Review. A HICAP counselor or a doctor can help you do this. Your HMO must review your case within 3 days.
- If you think you need to stay longer in the hospital, or have a complaint about your care, call **California Medical Review**.

## things you can do

### Help with Medicare

- Do you have questions or need help with your Medicare? For free help, call **HICAP**, a program that helps people use Medicare and get the care they need.
- For information, call **1-800-Medicare** or **Cal Medicare**.

### Changing or Leaving Your Medicare HMO

- To change HMOs, fill out an enrollment form at the HMO you want to join. It can take about a month to join. Do not drop your old plan until your new plan says you are covered.
- Leaving a Medicare HMO is called disenrolling. There are three ways to disenroll. You can send a request in writing to your HMO. You can visit your Social Security office and fill out a form. Or you can call **1-800-Medicare**.
- Before you disenroll, decide whether you want to join another HMO or get traditional Medicare.
- If you return to traditional Medicare, you can buy a Medigap policy to cover some of the services that Medicare doesn't cover. But be sure to meet the deadlines for getting Medigap. Call **HICAP**.

### Prescription Drugs

- Before you join an HMO or buy prescription drug benefits, see if the drugs you need are covered. Some HMOs do not cover prescription drugs, and some only cover generic drugs. See page 38.
- To compare drug benefits, call **Cal Medicare**.
- If your pharmacy accepts Medi-Cal, it must also offer drug discounts for Medicare members.
- There is a yearly limit on what many HMOs will pay for drugs.

## where to find help

### California Medical Review

Call about problems with the quality of your care

**1-800-841-1602** [www.cmri-ca.org](http://www.cmri-ca.org)

### Cal Medicare (California HealthCare Foundation)

Printed information about Medicare HMOs

**1-888-430-2423** [www.calmedicare.org](http://www.calmedicare.org)

### HICAP (Health Insurance Counseling & Advocacy Program)

Help for Medicare members

**1-800-434-0222**

### 1-800-Medicare

Information and help with Medicare

**1-800-633-4227** [www.medicare.gov](http://www.medicare.gov)

### Questions & Answers

**Q: Every time I have an appointment, I see a different doctor. How can I choose my own doctor?**

**A:** Call **Member Services** and ask for a list of primary care doctors. You may have to call several doctors before you find one who's taking new patients.

**Q: What if I don't like my doctor?**

**A:** You can change doctors. It may take up to a month to get a new doctor.

**Q: What if my plan ends its contract with my doctor?**

**A:** You will have to choose a new doctor. Ask your old doctor for the names of good doctors in the network. Or call **Member Services**.

If you are pregnant, you may be able to keep your doctor until after your baby is born. If you are being treated for a serious health problem, you may also be able to keep your doctor for a while. Call **Member Services**.

**Y**our primary care doctor gives you your basic care and oversees all your treatments. In many HMOs, you must have a primary care doctor. If you don't choose one, the HMO may choose one for you. But you can change doctors if you don't like the doctor you have.

You have the right to your own doctor in your HMO's network. It's a good idea to choose one, even if you don't have to. Your doctor can help you understand your care and get the services you need. Over time, your doctor will get to know you and can watch for changes in your health.

#### Find a Doctor You Like

"We met Dr. Liu at an urgent care clinic and really liked her, so we asked if she could be our regular doctor."



Kathy Sloane

## Your Doctor Has a Responsibility to You

Your primary care doctor has a duty to make sure you get the care you need. He must tell you all of your treatment choices. If he can't see you, you must be able to see another doctor. If your doctor leaves your plan, you must be told ahead of time so you can get another doctor.

## Choosing Your Doctor

Ask friends and co-workers which doctors they like. Then call the doctor's office and ask:

- Is the doctor in the HMO's network?
- Is the doctor taking new patients?
- How long does it take to get an appointment?
- Can I get evening or weekend appointments if I need them?
- Can the doctor help me with my problems—such as an ongoing condition or disability?
- How does the doctor make referrals to specialists?
- What happens in an emergency? Does the doctor use a hospital near me?
- How will I reach the doctor if I have a problem between visits?

## things you can do

### The Right Primary Care Doctor for You

- If you don't have a primary care doctor, you can get one. It's good to meet your doctor before you need care.
- Your primary care doctor can be a family doctor, an internist, a pediatrician or a gynecologist.
- You can also choose a nurse practitioner who works with a doctor.
- You may want one doctor for your whole family. Or family members may want their own doctor.
- Your doctor's office should be easy for you to get to. You can usually ask for a doctor within 15 miles or 30 minutes of your home or work.
- Ask your HMO for a list of doctors who speak your language. To get a report comparing language and cultural services, call **Office of the Patient Advocate**.

### Your Doctor's Medical Group

- A Medical Group is a group of doctors who have a business together and have a contract with an HMO to give services to the HMO members.
- If your doctor can't see you, another doctor in the Medical Group must see you.
- Most of the specialists you see will also be in your doctor's Medical Group.
- The Medical Group or your HMO may need to approve your doctor's referrals to specialists.
- For information on Medical Groups, order a free HMO Report Card. Call **Office of the Patient Advocate**.
- If your Medical Group closes or leaves the plan, your HMO must make sure you have care until you find a new doctor. If you have a problem, call **Member Services**.

## where to find help

### Member Services

To find your HMO's phone number, see page 60

### Office of the Patient Advocate

Report cards with information on Medical Groups

**1-866-466-8900**

**www.opa.ca.gov**

### Notes:



**G**ood health care depends on you and your doctor being able to talk freely. You should be able to discuss all your concerns comfortably.

### Questions & Answers

**Q: My doctor is always in a hurry. How can I get him to listen?**

**A:** Doctors are often in a hurry. If you don't feel that your doctor listens your concerns, repeat your questions. Ask him to explain his answers. If you still feel that he doesn't listen, you may want to change doctors.

**Q: How do I know what to tell my doctor? I don't know which symptoms are important.**

**A:** Tell your doctor all of your concerns—what hurts, where it hurts, when it hurts. And ask all your questions: Should I be worried? What should I do?

**Q: What if I don't speak English well?**

**A:** Look for a doctor who speaks your language, or ask your doctor or HMO for an interpreter. You have the right to an interpreter when you need one. See page 28.

**Q: How do I bring up hard topics, like sexual problems or drinking?**

**A:** Sometimes the things that are hardest to talk about are the most important. It may be easier if you make a list of your questions and give your doctor a copy.

Be as open as you can—the more your doctor knows about you, the better care she can give you. And let your doctor know if you don't understand what she says. Keep asking questions until you are sure you understand.

#### Ask for Explanations

Maria's doctor uses a model to explain birth control.



© Creatas

### Make the Most of Your Visit

Most doctor visits are short. Plan ahead so you can cover everything.

- Bring a list of your questions and concerns.
- Bring a list of all the prescription and over-the-counter drugs you take.
- Repeat things in your own words to make sure you understand.
- Take notes.
- If you need treatment, agree on a plan with your doctor.
- Ask how to reach your doctor between visits.
- If you have a lot to talk about, ask for another visit.
- Bring someone with you for support.

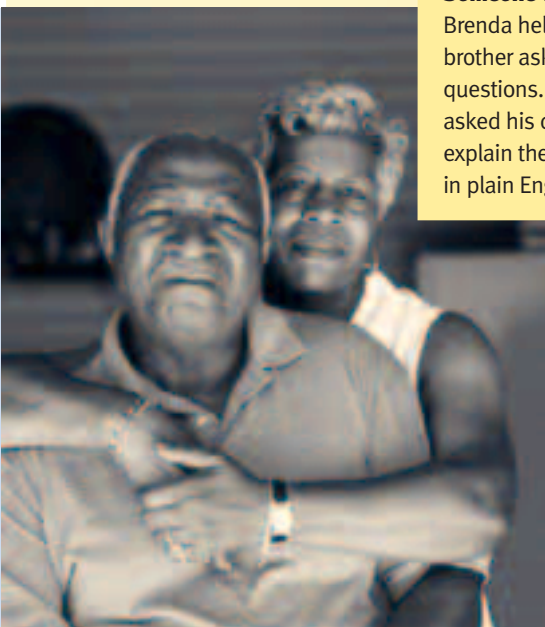


### When You Make an Appointment

- Ask how long you will have to wait.
- Ask how to get to the office and where to park.
- Ask if you need to do anything to prepare for your visit.
- Request a longer appointment if you need one.
- Request an interpreter if you need one. See page 28.
- Ask about access if you need to because of a disability. See page 26.

#### You Can Bring Someone with You

Brenda helped her brother ask all his questions. “We asked his doctor to explain the lab tests in plain English.”



© Digital Vision/Creatas

## things you can do

### Making Appointments

- Ask if there is a number to call to make appointments.
- You may be put on hold for a long time. Have something to do while you wait.
- You may find it easier to make an appointment in person, especially if you're already at your doctor's office and need another visit.

### Ask How to Reach Your Doctor Between Visits

- When you call, leave your phone number and the best times for the doctor or nurse to call you back.
- Ask who will call you back—your doctor, a nurse or someone else.
- Ask if you can fax or e-mail your message.
- If your doctor's office doesn't return your phone calls, call your Medical Group or HMO **Member Services**.
- If the person you speak with asks you for a lot of personal medical information, you can say that you want to tell your doctor the details.

### Bring a Friend or Relative with You

When you visit your doctor, you can bring someone with you to help you listen, ask questions and take notes. This is very helpful when you have to decide about treatments or start new drugs.

### Do Your Homework

If you are told you have a health problem, try to learn more about it. Write down questions for your doctor. See page 24 or visit [www.healthfinder.gov](http://www.healthfinder.gov).

## where to find help

### Healthfinder

An introduction to health information on the Internet

[www.healthfinder.gov](http://www.healthfinder.gov)

### Member Services

To find your HMO's phone number, see page 60

### Notes:

### Questions & Answers

#### Q: Can I get a second opinion?

**A:** You have a right to get a second opinion. But if you want to see a doctor outside your HMO's network, you need a referral from your HMO. This can take about a week. If your problem is urgent, your HMO must reply to your request in 3 days. Or you can pay for the visit yourself.

#### Q: What if my HMO won't pay for the treatment my doctor recommends?

**A:** You can file a complaint with your HMO. See page 48.

#### Q: I read about a new treatment for my cancer. How can I learn more about it?

**A:** Ask your doctor about it. It may not be approved for the public yet. Look for information on the Internet or at a medical library, or call **Cancer Information**.

#### Q: What if I don't want any treatment?

**A:** You have the right to refuse treatment for yourself.

**I**t is not always easy to choose the best treatment. Most treatments have risks as well as benefits. Work with your doctor and learn about your choices so you can make an informed decision. If you have a serious health problem, you may want to get a second opinion about your treatment from another doctor in your HMO.

Your doctor should tell you all your treatment choices, even if they are not covered by your plan. If you need to decide about an important treatment, ask how much time you have to decide. It can take some time to understand your choices.

### Compare Treatments

- What are the risks and benefits of each treatment?
- What risks are you willing to take?
- Which treatments are most likely to help? Least likely?
- How much time will each treatment take? What about recovery time?
- How much will each treatment cost you?
- How much discomfort or pain are you willing to take?

Human Issues Collaborative



#### Work with Your Doctor

"My doctor and I talked about ways to manage my colitis. We agreed on a treatment plan that works for my lifestyle."

## things you can do

### Talk with Your Doctor About Your Treatment

- Ask about common side effects. How can they be treated or prevented?
- What should you do if you have a side effect?
- How will you know if your treatment is working or if it should be stopped?
- If you are in a lot of pain, tell your doctor. Ask about pain treatments. See page 47.

### Learn About Your Medical Condition

- Visit your local library or a medical school or hospital library.
- Ask your doctor about medical centers doing research on your health problem.
- Look for a local group that helps people with your health problem, like the American Cancer Society.
- Look on the Internet. Visit [www.healthfinder.gov](http://www.healthfinder.gov) or [www.health.nih.gov](http://www.health.nih.gov).
- To learn about your lab tests, visit [www.labtestsonline.org](http://www.labtestsonline.org).
- To learn about medical guidelines for treating your health problem, visit [www.guideline.gov](http://www.guideline.gov).

### You Ask for a Second Opinion:

- When your problem or the cause is unclear.
- When you have doubts about surgery.
- When you have doubts about a treatment for a serious health problem, or when the treatment isn't working.

### Ask Questions

Rachel asks her doctor about the risks and benefits of treatments for her daughter's heart problem.

### Before You Agree to a Treatment

You usually have to sign a consent form before you or your children receive treatment. The form says you agree to the treatment. Before you sign, make sure you understand what is being done and why. Compare the risks and benefits of all the treatment choices. Don't decide about health care treatments when you are stressed, sleepy or taking drugs for pain.

## where to find help

### Cancer Information

Information on cancer treatments

**1-800-422-6237**

[www.cancer.gov](http://www.cancer.gov)

### Healthfinder

An introduction to health information on the Internet

[www.healthfinder.gov](http://www.healthfinder.gov)

### Lab Tests Online

Information about lab tests

[www.labtestsonline.org](http://www.labtestsonline.org)

### National Guideline Clearinghouse

Care guidelines for many health problems

[www.guideline.gov](http://www.guideline.gov)

### National Institutes of Health

Information on many health issues [www.health.nih.gov](http://www.health.nih.gov)

### Notes:



# If You Have a Disability

## Questions & Answers

**Q: I was referred to a specialist, but I can't get into his office because I use a wheelchair. What should I do?**

**A:** The specialist or your HMO must find you an accessible provider. Your HMO must pay for this provider, even if he is not in the HMO's network.

**Q: I have a rare condition. There's a new treatment that might help, but my HMO won't pay for it. What can I do?**

**A:** Discuss the new treatment with your doctor. You may be able to get a review of your HMO's decision. See page 52.

### Ask for What You Need

Mona's HMO did not have a mammogram machine she could use. So she asked the HMO to pay for her visit to a clinic outside the network.

**M**ake sure that you get all the services you need, from routine care to care for your disability. Know your rights and look for a doctor who understands your disability and will support you in getting services. If you can't get into a provider's office or use his equipment, ask your HMO to find you another provider.

You or your doctor may ask for changes in the way services are offered. For example, you may need someone with more training to draw your blood. Or you may need routine dental work done in a hospital. Your HMO must pay for these services if there are medical reasons why you need them.



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### You Have the Right to:

- Have most physical barriers removed that make it hard for you to use your health care services.
- Extra time for visits if you need it.
- A sign language interpreter if you need one. See page 28.
- Health information you can use if you are blind or have low vision.
- Special medical equipment, like an exam table or a scale that works for you if you use a wheelchair.
- Take your service animal into exam rooms with you.

For more information on these rights, visit [www.dralegal.org](http://www.dralegal.org).



## When You Apply for Health Insurance

Your employer's plan cannot refuse to cover you, or charge you more, if you have a disability. If you apply for insurance on your own, a plan can charge you more, but only if it can show that care for your disability costs more. See pages 13–15.



© Harry Cutting

### Your Doctor Should Be Your Advocate

Because of her disability, Suzanne needed extra days in the hospital after her baby was born. "My doctor helped me get the care I needed."

## things you can do

### When You Make an Appointment

Let the provider know if you will need help getting onto an exam table, extra time for an appointment, a sign language interpreter, an accessible bathroom or other services.

### Your Medical Records

It's a good idea to keep your own copy of your medical records. If you change providers, it can take a while for your new provider to get your records. See page 7.

### Medical Equipment

- Before you join an HMO, ask if it covers the equipment you need and what the copayment is.
- HMOs only pay for "medically necessary" equipment. If you disagree with your HMO about what you need, see page 48.
- For more information about equipment for people with disabilities, call **Protection & Advocacy** or **AT Network**.

### Protect Your Rights

- For a guide on your rights to health insurance and accessible health care in California, call **Disability Rights Advocates**.
- For legal assistance, call **Protection & Advocacy**.

### Find More Services

- For services for children with disabilities, see page 34.
- For more information on health care programs, talk to your local Independent Living Center or visit [www.cfilc.org](http://www.cfilc.org).
- In Home Support Services (IHSS) helps people with low incomes and disabilities pay for some home health care. To apply, call your county Social Services department.

## where to find help

### AT Network

Information on equipment and assistive technology

**1-800-390-2699**

[www.atnet.org](http://www.atnet.org)

### California Foundation for Independent Living Centers

Resources for people with disabilities

[www.cfilc.org](http://www.cfilc.org)

### Disability Rights Advocates

A guide to the health care rights of people with disabilities

**1-888-926-0274**

[www.dralegal.org](http://www.dralegal.org)

### Protection & Advocacy

Legal advocacy for people with disabilities

**1-800-776-5746**

[www.pai-ca.org](http://www.pai-ca.org)

### Notes:

## Questions & Answers

### Q: When should I ask for an interpreter?

**A:** You should ask for an interpreter any time understanding your doctor is important to your health, such as when she explains the results of your tests. Make sure to call before your visit to ask for an interpreter.

### Q: Do I have to pay for interpreter services?

**A:** This service is usually free—check with your health plan. Call **HMO Help Center**.

### Q: How can I find an HMO with services in my language?

**A:** You can get a report on California HMOs and the language and cultural services they offer. Call **Office of the Patient Advocate**.

### Q: What if I am Deaf or Hard of Hearing?

**A:** You have the right to a sign language interpreter. Try not to rely on lipreading. Even good lip-readers can have trouble with medical terms. For more information, call **Deaf Counseling, Advocacy and Referral Agency**.

**Y**ou and your family have the right to good communication with your doctor and other providers. Look for doctors who speak your family's language or ask for an interpreter if you need one.

You have the right to an interpreter who translates medical information correctly and respects your privacy. You also have this right when you seek care for your child, so that you can talk with your child's doctor.

## Ask for a Medical Interpreter

- Certified medical interpreters are trained to translate health information correctly.
- They must respect your privacy and keep all information private.
- The interpreter may be in the same room with you and the doctor, or may be on the telephone or a video screen.
- You can request an interpreter if you speak another language or use sign language.
- You can also ask your HMO for written materials in your language.

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### Now I Ask for an Interpreter

"My daughter used to interpret for me, but I didn't like talking about my problems in front of her. So now I ask for an interpreter."



Human Issues Collaborative

**If Your Language Is American Sign Language**

You have the right to an interpreter so that you and your doctor can understand each other.

**Try Not to Depend on Your Family and Friends to Interpret for You**

You may not feel comfortable having a friend or relative hear your private health problems or questions. And they may not translate medical information correctly. You may want a family member or friend with you for support, but try not to rely on them to interpret for you.

**things you can do**

**Making Appointments**

- Ask if your HMO has staff who speak your language and can help you make appointments.
- If you know that you will need an interpreter, tell your doctor as far ahead as you can.

**You and Your Doctor**

- Ask your HMO for a list of doctors who speak your language.
- Your doctor should treat you and your culture with respect, even if she does not speak your language.
- Make sure that you and your doctor understand each other. If something is not clear, repeat it in your own words. Ask the interpreter to translate your words back to the doctor.

**You Have the Right to an Interpreter When You Need to**

- Explain your symptoms or medical history to your doctor.
- Understand your health problem or treatment choices.
- Understand instructions about medications, medical equipment or follow-up care.

**Order California's HMO Guide in Spanish**

To order this guide in Spanish, call **1-866-466-8900**.

**Health Care Topics in Many Languages**

For information in many languages on Medi-Cal and Healthy Families, visit [www.healthconsumer.org](http://www.healthconsumer.org).

**where to find help**

**Deaf Counseling, Advocacy and Referral Agency**

Resources for people who are Deaf or Hard of Hearing

**1-877-322-7299**

[www.dcara.org](http://www.dcara.org)

**1-877-322-7288 (TTY)**

**Health Consumer**

Health care information in several languages

[www.healthconsumer.org](http://www.healthconsumer.org)

**HMO Help Center**

Help and information in many languages

**1-888-HMO-2219**

[www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)

**Office of the Patient Advocate**

Report cards with information on California HMOs

**1-866-466-8900**

[www.opa.ca.gov](http://www.opa.ca.gov)

**Notes:**

## Questions & Answers

**Q: I have a lot of benefits, but will I be able to use them if I need them?**

**A:** Yes, you can use your benefits when they are needed for your health care. If you have a problem getting services you need, see page 48.

**Q: I read about a new treatment that may help my heart problem. But my plan says it doesn't cover experimental treatments. What can I do?**

**A:** You can file a complaint with your HMO and ask for a review of the decision. You may get the treatment if research shows that it could help. See pages 50 and 52.

**Q: My husband and I have been trying to have a baby for 5 years. Our doctor suggests infertility treatments. Will my plan pay for these?**

**A:** Your plan may pay for part of your treatment. Call your **Member Services** to find out what is covered.

**W**hen you buy health insurance, you are buying a set of services called a benefit package. All HMO benefit packages include the same basic services, but details may differ and some HMOs include more services.

Your HMO must give you a written description of your benefits. This is often called the Evidence of Coverage. It lists what your plan does and does not pay for.

Before you join an HMO, find out if it covers the services you need. For example, if you are planning to have a baby, you will want to know about pregnancy benefits. If you take any medications, you'll want to know about prescription drug benefits.

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### Many HMOs Have Health Education Programs

You can get free brochures, borrow videos, talk to a health educator—or take a childbirth class.



Kathy Soane

### Finding Problems Early

Marvin is having his yearly checkup. All HMOs provide basic care like this to find and prevent problems.

### All HMOs Include These Basic Services in Their Benefit Packages

- Doctor services.
- Hospital and outpatient services.
- Lab work like blood tests, STD tests and pregnancy tests.
- Tests like x-rays and mammograms.
- Preventive care, like vaccinations and checkups.
- Emergency and urgent care—even if you are outside your HMO's service area. See page 42.
- Some physical therapy.
- Some home health or nursing home care after hospital visits.
- Some care at home for people who are dying. See page 46.
- Mental health care for some serious problems. See page 40.
- Diabetes home care supplies.

## things you can do

### Learn About Your Benefits

- Your Evidence of Coverage is your contract with your HMO. It explains your benefits and fees.
- For easier reading, ask for a summary of your benefits.
- Remember, two people in the same HMO may not have the same benefits. They or their employers may not have bought the same benefit packages.
- Have a question? Call your HMO's **Member Services** or your benefits office at work. Visit [www.hrh.org](http://www.hrh.org) or [www.healthscope.org](http://www.healthscope.org).

### Prescription Drug Benefits

- Prescription drugs are part of most benefit packages provided by employers. Your HMO will have a list of the drugs it covers. See page 38.
- If a plan covers prescription drugs, it must also cover prescription birth control.
- If a plan covers prescription drugs, it must cover diabetes medications.

### When You Join a New Plan

You may not be able to use all your benefits right away. There may be a waiting period before you can get care for health problems you have before you join the plan. See page 14.

### Vision, Hearing and Dental Care

Ask if your plan covers vision and hearing care, or part of the cost of glasses or hearing aids. Most plans do not cover routine dental care unless it requires a hospital stay. You may be able to get these or other benefits for an extra fee.

## where to find help

### Health Rights Hotline

Health care rights and resources [www.hrh.org](http://www.hrh.org)

### HealthScope

Information on California HMOs [www.healthscope.org](http://www.healthscope.org)

### Member Services

To find your HMO's phone number, see page 60

### Notes:

## Questions & Answers

### Q: What should I do if I'm sick?

**A:** If you're sick, call your doctor or your HMO's Advice Nurse. You may not need to visit the doctor's office if they can tell you what to do to feel better. But if you think you need an appointment, make sure you get one.

### Q: Will my plan pay for routine care if I'm traveling?

**A:** No. If you're outside your HMO's service area, only emergency and urgent care will be covered. See page 42.

### Q: I have sickle-cell disease. I'd like to see a specialist for my regular care. Is that possible?

**A:** If you have a health problem that needs ongoing care from a specialist, you may be able to see the specialist for your routine care. Call **Member Services**.

**R**outine care is care that helps your doctor prevent health problems or find them before they become serious. Routine care includes services like physical exams, checkups, lab work and gynecological exams.

You and your doctor should agree on how often you need a complete exam and routine tests. Your HMO may have a schedule for these visits. If that schedule doesn't work for your health needs, talk with your doctor about changing it.

Make the most of your visits. Ask questions about things that have been bothering you. Remember moles that have changed, pains that come and go. These exams are a chance to look at the health of your whole body.

Human Issues Collaborative

#### I Learned I Have High Blood Pressure at My Annual Exam

"So my doctor said I should start exercising to help keep it under control."

## things you can do

### How Often Should You Have an Exam?

- Ask your doctor or your HMO **Member Services** how often you should have routine exams and tests.
- Ask for schedules for children's checkups. See page 34.
- Make sure your family's shots and vaccinations are up to date. Call **National Immunization Hotline**.
- Ask about screening for skin cancer.
- Talk with your doctor about testing for STDs (sexually transmitted diseases), HIV, and hepatitis B and C.
- Ask about prostate exams for men.
- Ask about breast exams, pelvic exams and mammograms for women.
- If you're an older adult, ask what exams you may need more often, like hearing, vision and colon cancer screenings.

### Keep Track of Your Care

For forms to help you keep track of your family's care, call the **Agency for Healthcare Research and Quality**.

### Know Your Family's Medical History

If a disease or other health problem runs in your family, talk to your doctor. She may want you to have exams more often or take other steps to stay healthy.

### Well-Child Visits

Charlene's well-child visit includes immunizations, an ear exam and other routine services for children.

## Ask About Your Tests

Before you have a test, ask why it is being done, how it will be done and if there are any risks. Make sure that you get the results of your tests, and ask your doctor to tell you what they mean. To learn about lab tests, visit [www.labtestsonline.org](http://www.labtestsonline.org).

## where to find help

### Agency for Healthcare Research and Quality

Personal Health Guides to routine care

**1-800-358-9295**

[www.ahrq.gov](http://www.ahrq.gov)

### Lab Tests Online

Information about lab tests

[www.labtestsonline.org](http://www.labtestsonline.org)

### Member Services

To find your HMO's phone number, see page 60

### National Immunization Hotline

Immunization guidelines

**1-800-232-2522**

[www.cdc.gov/nip](http://www.cdc.gov/nip)

### Notes:

## Questions & Answers

### Q: What does a family practice doctor do?

**A:** She treats children as well as adults and can be the primary care doctor for your whole family.

### Q: How do I find a family doctor or a pediatrician?

**A:** Ask other parents and your own doctor. For more tips, see page 20 or visit [www.kidshealth.org](http://www.kidshealth.org).

### Q: My doctor is no longer in my HMO's network. I'm 6 months pregnant. What should I do?

**A:** You can usually see the same doctor until after the birth. Check with your plan.

### Q: My 2-year-old gets bad earaches and wakes up screaming. What should I do?

**A:** Talk to your child's doctor. He can tell you how best to prevent or treat the problem.

### Q: I am pregnant. How do I get an obstetrician?

**A:** You can see an obstetrician in your HMO network without a referral. But you may want to ask your primary care doctor for names.

If you are a parent, your children's health is one of your biggest concerns. Make sure your children have regular well-baby and well-child checkups. These will help prevent problems and keep your children healthy.

You will want to talk with your children's doctor about many issues, such as breastfeeding, nutrition and immunizations. Both you and your children should be comfortable with your doctor.

#### Low-Cost Insurance for Your Children

"I'm a single mom. I have insurance through my work, but I insure my baby through **Healthy Families**."

## Pregnancy and Childbirth

- When you choose an obstetrician, ask which hospital or birthing center he uses. Ask what birth options are covered by your plan. Visit [www.childbirth.org](http://www.childbirth.org).
- If you are in labor, any hospital emergency room must accept you. But go to your HMO's hospital if you can.
- By law, HMOs must cover at least 2 days in the hospital after vaginal delivery and 4 days after a C-section.
- For low-cost health insurance for middle-income pregnant women, call **AIM Program**.

## Health Insurance for Babies and Young Children

- If you want to insure your baby or adopted child through your HMO, you must apply within 30 days of the birth or adoption. Ask your HMO what services for your child are covered in the first 30 days.
- Ask what newborn tests are covered by your plan, such as newborn hearing tests.
- Ask for a schedule for well-baby and well-child visits and immunizations. After age 5, take your child to the doctor at least once a year.
- For low-cost insurance for children, call **Healthy Families** or see page 16.



## Health Care for Teens

Teens often don't get the care they need. Help your teen find a doctor he likes or see if your HMO offers a clinic just for teens. Explain to your teen that some services are confidential, such as treatment for substance abuse, physical abuse, STDs and birth control. Call **Talking with Kids**.

## things you can do

### Urgent Care for Children

Children often need to see a doctor the day they get sick. Ask your children's doctor or nurse how to make same-day, evening and weekend appointments.

### Healthy Families Insurance

You may be able to get low-cost health, dental and vision insurance for children through some HMOs. It's a great choice if you qualify. Call **Healthy Families**.

### More Information for Parents

Ask your HMO about classes on childbirth, breastfeeding, nutrition or exercise. Visit [www.wellnessguide.org](http://www.wellnessguide.org).

### Children with Special Needs

- If your child has a disability or chronic health problem, see pages 14 or 26.
- For help getting services, call **Family Voices**.
- For help paying for treatment, call California Children's Services at your county Health Department.

## where to find help

### AIM Program

Insurance for low- to middle-income pregnant women & infants

**1-800-433-2611** [www.mrmib.ca.gov](http://www.mrmib.ca.gov)

### Childbirth

Information on childbirth [www.childbirth.org](http://www.childbirth.org)

### Family Voices

Health care advocacy for children with disabilities

**1-888-835-5669** [www.familyvoices.org](http://www.familyvoices.org)

### Healthy Families

Health insurance for families with low to middle incomes

**1-800-880-5305** [www.healthyfamilies.ca.gov](http://www.healthyfamilies.ca.gov)

### KidsHealth

Health care for children [www.kidshealth.org](http://www.kidshealth.org)

### Talking with Kids

Free booklet on talking with kids about difficult issues

**1-800-244-5344** [www.talkingwithkids.org](http://www.talkingwithkids.org)

### Notes:

## Questions & Answers

### Q: Do I need a referral if I am seriously ill?

**A:** Yes. If you are seriously ill but not in immediate danger, you need approval first. Tell your doctor to get an expedited referral. Your HMO must reply to your request within 3 days.

### Q: If I need ongoing care from a specialist, do I need to get a referral for each visit?

**A:** Not if you have a “standing referral.” Ask your doctor or HMO how to get one. It lets you see the specialist when you need to.

### Q: I have HIV. How can I see a doctor who knows about HIV?

**A:** People with HIV have the right to get a standing referral to a doctor who specializes in treating HIV/AIDS.

### Q: Do I need a referral to see an obstetrician/gynecologist?

**A:** No. You may see an obstetrician/gynecologist in your HMO’s network without a referral.

#### When I Had a Heart Attack

“My doctor gave me a referral to a heart specialist. He worked with my doctor to develop a treatment plan.”

A specialist is a doctor who has extra training in one area of medicine. For example, an oncologist is trained to treat cancer, and a gerontologist is trained to treat the problems of aging.

You usually need a referral from your primary care doctor to see a specialist. You may also need approval from your HMO. In most cases, you must see specialists who are in your HMO’s network.

It can be hard to get a referral to a specialist. Even with a referral it can take time to get an appointment. Many specialists have long waiting lists. Ask your doctor or HMO for help when you need to see a specialist.

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## Choosing a Specialist

- Ask your doctor to give you the name of a specialist or ask your HMO for a list of specialists.
- If you need something done that is risky, look for a specialist in your plan who has done the procedure many times.
- To learn about a specialist’s training, call **American Board of Medical Specialties**.

### Your Primary Care Doctor Leads Your Medical Team

Your primary care doctor can handle most of your health care needs. Sometimes she will work with specialists to plan your care and treat a problem. You will return to her for routine care.

#### Pediatric Specialists

Ask your HMO which pediatric specialists are available. They are specialists with extra training in children's care.

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## things you can do

### Ask How to Get a Referral to a Specialist

- Ask your doctor how to see a specialist in his Medical Group.
- If you want to see a specialist who is in your HMO's network but not in your doctor's Medical Group, ask your HMO.
- It usually takes about 5 working days to get a referral. If your problem is urgent, you should be able to get a referral within 3 days or less.

### To See a Specialist Who's Not in Your HMO

If there's no specialist in your HMO who can give the care you need, or if the waiting list is too long, ask your HMO for a referral to a specialist outside the network. Or you may choose to pay for the visit yourself.

### If You Can't Get the Referral You Request

If you ask for a referral and you don't get it, your doctor should tell you why. If you disagree, you can file a complaint with your HMO. Call your **Member Services** or see page 48.

### Your Doctor May Refer You to a Specialist If

- You need a treatment or therapy that requires special training to perform.
- Your test results are unclear.
- The treatment you are on now is not helping you.
- You have a serious health problem and need a doctor who knows more about treating it.

To learn about a specialist's training, visit [www.abms.org](http://www.abms.org).

## where to find help

### American Board of Medical Specialties

Information about specialists' training

**1-866-275-2267**

[www.abms.org](http://www.abms.org)

### Member Services

To find your HMO's phone number, see page 60

### Notes:

## Questions & Answers

**Q: Why does my plan make me take generic drugs instead of brand-name drugs?**

**A:** Generic drugs cost less than brand-name drugs. When a company's patent on a new drug ends, other companies can make the drug. It becomes generic and costs less.

**Q: My problem was getting better, but my HMO took my medicine off the formulary. Can they do that?**

**A:** Yes, your HMO can change its formulary. But if you can show that you need the drug, your HMO may cover it for you. See pages 48–53.

**Q: I'm leaving my job. What can I do to protect my prescription drug benefits?**

**A:** Try to keep your insurance through COBRA. It almost always costs more to get drug benefits on your own. See page 12.

**Q: I saw an ad on TV for a new drug. But my doctor won't give it to me. Why?**

**A:** He may think you don't need it. If your doctor thinks you need it but it's not in your HMO's formulary, see pages 48–53.

**N**ot all plans pay for prescription drugs. If your plan does, your doctor will usually choose medicines from a list of the drugs the plan covers. This list is called a formulary. If you want to use drugs that are not on this list, you must get your HMO's approval or pay for them yourself.

Most drugs in the formulary are generic drugs. These drugs cost less than brand-name drugs but have the same basic ingredients. Some HMOs cover brand-name drugs for a higher copay.

Your HMO may cover some medical equipment, like walkers and wheelchairs. Only equipment that you medically need will be covered, and you may have to pay part of the cost.

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## Prescription Drug Costs

If your plan covers prescription drugs, you will pay a fee, called a copay, each time you pick up a prescription. Some drugs may have higher copays than other drugs. There may also be a limit on the amount your plan will pay for drugs each year.

## Tell Your Doctor About All Your Medications

Lily shows her new doctor all the medicines she takes and asks if she should keep taking them.



## things you can do

### When You Order a Prescription or Refill

- Ask your doctor or pharmacist what the copayment will be.
- If you need a refill that day, order it early in the morning.
- If your doctor needs to approve a refill, order it 3 or more days before you need it.
- When you pick up a prescription, make sure it's correct.
- Talk to your pharmacist when you get a new medication.
- Ask your HMO about ordering prescriptions by mail. They almost always cost less. You can order for 3 months at a time.

### Your HMO's Formulary

Ask to see the list of drugs your HMO covers—its formulary. Ask how often your HMO changes its formulary. To see what's in California HMO formularies, visit <http://ca.mcodrugs.com>.

### Birth Control

If a plan covers prescription drugs, it must cover prescription birth control methods, like birth control pills.

### Keep Drug Costs Down

- When your doctor gives you a prescription, ask if your HMO covers it.
- Ask for generic drugs.
- If you are on Medicare, see page 19.
- For help paying for HIV/AIDS medications, call **AIDS Drug Assistance Program**.
- Ask your doctor about free samples and drug company discounts for people with low incomes.
- If you need a drug that your insurance won't pay for, compare costs from different pharmacies. But be careful, so you don't get the wrong drug or a dangerous drug by mistake.

### Medical Supplies and Equipment

- Equipment like crutches and wheelchairs is called durable medical equipment. You may need your HMO's approval to get equipment. See page 27.
- HMOs must cover most home care supplies for diabetes.

### Medical Equipment

Larry's plan pays for his crutches. He needs them to stay healthy and active.

## Take Charge of Your Medications

If your doctor suggests a new medication, ask about side effects, risks and benefits. Ask about other treatments or what could happen if you go without treatment.

Tell your doctor about any allergies or bad reactions you have had to medications. Tell him all the medicines, vitamins and herbs you take. And tell him if a drug does not seem to be helping.

## where to find help

### AIDS Drug Assistance Program

Help paying for drugs to treat HIV/AIDS

**1-888-311-7632**

[www.ramsellcorp.com](http://www.ramsellcorp.com)

### California Internet Formulary

HMO drug formularies

<http://ca.mcodrugs.com>

## Questions & Answers

**Q: If I get mental health services through my HMO, will my employer or anyone else know?**

**A:** Usually no. But in some cases, others may see your medical records. If you apply for new insurance, the company may ask to view your records. If you are involved in a court case, the court may decide to look at your records. Visit [www.calpatientguide.org](http://www.calpatientguide.org).

**Q: The medication I take for my depression helps, but I feel there's a lot of prejudice against people with problems like mine. What can I do?**

**A:** You have the right to be treated with respect. Self-advocacy groups can help you stand up for your rights and get support. Call **National Mental Health Association** or **California Network of Mental Health Clients**.

**Q: I'm on Medi-Cal. Can I get counseling?**

**A:** Yes. If you need mental health services, you can call your County Mental Health Agency. See page 17.

**P**roblems like depression and anxiety may be treated with counseling, medication or hospital care. These services help many people with short-term or long-term problems.

Your HMO must cover some serious mental health problems. Children as well as adults have this coverage.

Even if your problem does not seem serious, your HMO may provide some benefits. For example, if you feel a lot of anxiety or stress, you may be able to see a counselor.

© Jim Arbogast/GettyImages/PhotoDisc

### Deciding About Medication

"My medicine is helping me deal with depression. I had to try three medications before finding one that worked."

### Counseling Services

Even if you do not have a serious mental health problem, your plan may still cover some counseling services. However, if your problem is not serious, your copay for counseling may be higher than the copay for a doctor's visit.

## Mental Health Care for Serious Problems

HMOs must cover some mental health problems, like severe depression, manic depression, schizophrenia, panic disorders and eating disorders. HMOs must also cover children's serious emotional problems.

Your HMO must provide the same benefits for these mental health problems that it does for other health problems. The copays must be the same. If your plan covers prescription drugs, drugs for these mental health problems must also be covered. You have these rights under the state Mental Health Parity Law.

### Mental Health Care for Teens

"My daughter was having panic attacks. Our doctor helped her find counseling through our HMO."

© Harry Cutting

## things you can do

### If You Want Mental Health Care Services

- Ask your HMO what mental health care it pays for.
- You may be able to get services without a referral from your doctor. Ask your HMO.
- Some HMOs use independent services, called behavioral health care services, to provide mental health care.

### Mental Health Care

- Care may include visits to a counselor, psychologist or psychiatrist, or group therapy.
- Most plans cover up to a month of hospital (inpatient) care. Some cover a shorter stay with follow-up care.
- If you cannot work because you are in the hospital, you may be covered by Disability Insurance or Family Medical Leave. Talk to your employer.
- If you are put in the hospital without your consent, forced to take medication or treated badly, call **California Office of Patients' Rights** or **Protection & Advocacy**.
- Your HMO may offer support groups for people dealing with issues like smoking, drinking, stress or parenting.

### Medications

Ask your doctor about side effects. If a medication does not seem to be helping, ask about other options. See page 38.

## where to find help

### California Network of Mental Health Clients

Peer support for mental health clients

**1-800-626-7447**

[www.cnmhc.org](http://www.cnmhc.org)

### California Office of Patients' Rights

Advocacy for patients hospitalized with mental illness

**1-916-575-1610** (Not a toll-free number)

### California Patient's Guide

A guide to health care rights

[www.calpatientguide.org](http://www.calpatientguide.org)

### National Mental Health Association

Information, advocacy and referrals for adults and children

**1-800-969-6642**

[www.nmha.org](http://www.nmha.org)

### Protection & Advocacy

Legal advocacy for people with disabilities

**1-800-776-5746**

[www.pai-ca.org](http://www.pai-ca.org)

### Notes:

### Questions & Answers

**Q: What if it's an emergency and the nearest hospital is not in my HMO's network?**

**A:** Your HMO will cover emergency care at any hospital. But you should call your HMO as soon as you can. Your HMO may move you to a hospital in your plan when you are stable enough to be moved.

**Q: What about ambulance services?**

**A:** Your HMO must cover ambulance services in an emergency.

**Q: What if my HMO refuses to pay for my emergency care?**

**A:** You and your HMO may not agree on what problems need emergency care. If this happens, you can file a complaint. See pages 48–53 or call **HMO Help Center**.

**I**n an emergency, you should call 9-1-1 or go to the nearest emergency room. Your HMO must cover emergency care. If you can, go to a hospital in your HMO network. However, any emergency room must treat you until you are well enough to be moved to your HMO's hospital. Your HMO must pay for this treatment.

In general, the law says it's an emergency if average people think it's an emergency. If you are not sure if it's an emergency and there's time to call, phone your HMO or doctor. If you need care soon but not right away, you may be able to use your HMO's urgent care services. Urgent care is care you need within 24 to 48 hours.

Custom Medical Stock Photo

#### **In an Emergency**

Go to a hospital in your HMO if you safely can. Otherwise, go to the nearest emergency room. Shock, severe wounds, a heart attack and labor are all emergencies.



© Gettyimages/Eyewire Collection

### On Vacation

“When Tommy broke his arm, we went to the nearest emergency room. Then I called our HMO **Member Services** to get approval for his follow-up care.”

## What Is an Emergency?

It is an emergency if you think your health is in serious danger and you need care right away. The law says you don’t need to have medical training to decide it’s an emergency. You can be an average person.

You may have a bad injury or sudden illness. You may have an illness that is quickly getting much worse. Severe pain and active labor are also emergencies.

## things you can do

### Call the Advice Nurse at Your HMO

Your HMO’s Advice Nurses can help you decide what care you need.

### Poison Action Line

If someone swallows or inhales something poisonous, call **Poison Action Line** right away. You will be told what to do.

### Your Rights

- If it’s an emergency, you can get care at any hospital emergency room, even if it’s not part of your HMO. Your HMO must pay for it.
- If you are in a hospital that is not part of your HMO, your HMO may move you to a network hospital. You must be stable, so that the move won’t make you worse.
- If you are in labor, you can go to any emergency room. But try to go to your own hospital.
- For more information, visit [www.calpatientguide.org](http://www.calpatientguide.org).

### Be Prepared

- Learn your plan’s guidelines for emergency and urgent care.
- Ask about the copay for emergency room visits. It may be more than other copays.
- Ask your doctor what to do if your child needs urgent care.
- Ask about hospitals and urgent care centers in your HMO.
- Keep your HMO membership card with you at all times.

### When You’re Traveling

Your HMO should pay for emergency and urgent care when you are out of its service area. You should call your HMO as soon as you can. If your HMO won’t pay the bill, see pages 48–53.

## where to find help

### California Patient’s Guide

A guide to health care rights [www.calpatientguide.org](http://www.calpatientguide.org)

### HMO Help Center

Help for California HMO members

**1-888-HMO-2219** [www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)

### Member Services

To find your HMO’s phone number, see page 60

### Poison Action Line

Emergency help for victims of poisoning

**1-800-876-4766** [www.calpoison.org](http://www.calpoison.org)

**Questions & Answers**

**Q: I am having a hysterectomy, but I am staying in the hospital only two nights. That doesn't seem long enough.**

**A:** Hospital stays are shorter these days. This is partly because hospital care is very costly. But there's another reason—many people recover better at home than in the hospital.

If you feel you need a longer hospital stay, ask your doctor if he can arrange it with your HMO. If your HMO says no, see page 48. If you're on Medicare, see page 18.

**Q: I was in the hospital, and some of the staff were really rude. They ignored my requests for help. What can I do?**

**A:** You can complain to your doctor and the hospital. You can also write a letter to your HMO. See page 48.

**F**or some care, you need to stay overnight in a hospital. This is called inpatient care. It can include childbirth, surgery and substance abuse treatment.

Your doctor usually refers you for hospital care. If there is more than one hospital in your plan, your doctor can help you choose the one that's best for your problem. Ask your doctor who will oversee your care in the hospital and what you can expect during and after your treatment.

**Visitors  
Are Important**

If a relative or friend helps watch out for you in the hospital, you'll probably get better care.

**Going Home**

Your doctor or nurse or a discharge planner will talk with you and your family about care at home.

**Choosing a Hospital**

Find out which hospital in your plan treats your health problem most often. If a hospital has a lot of experience with your condition, you will probably get better care. For more information on hospitals, visit [www.healthscope.org](http://www.healthscope.org) and [www.jcaho.org](http://www.jcaho.org).

If you and your doctor think that you need to be treated at a hospital outside the HMO's network in order to get the care you need, you can ask your HMO. If your HMO says no, see page 50.

**things you can do****Know Your Hospital Benefits**

- In most cases, you must use the hospitals in your plan's network. Ask your HMO for a list.
- Unless it's an emergency, you must have a referral from your doctor to get hospital care.
- If you are in a hospital that's not in your HMO's network, call your HMO as soon as you can.
- For more information, visit [www.calpatientguide.org](http://www.calpatientguide.org).

**Before Your Hospital Stay**

- Ask how long you are likely to stay in the hospital.
- Ask people you trust to visit and watch out for your care.
- Find out who will be in charge of your care in the hospital. Will it be your doctor or someone else?
- If you are having surgery, make sure to meet with your surgeon and anesthesiologist ahead of time. Ask any questions you have. Visit [www.facs.org](http://www.facs.org).
- Make sure you understand what will happen during your procedure and how long it may take to recover.
- Fill out an Advance Health Care Directive. This form tells others what kind of care you want if you are not able to speak for yourself. See page 47.

**After Your Hospital Visit**

You may need physical therapy, nursing care or help around the house. Most hospitals have someone called a discharge planner who can help you decide how much help you will need and where to find it.

**where to find help****American College of Surgeons**

Information on common operations and choosing a surgeon  
[www.facs.org](http://www.facs.org)

**California Patient's Guide**

A guide to health care rights [www.calpatientguide.org](http://www.calpatientguide.org)

**HealthScope**

Information on California hospitals [www.healthscope.org](http://www.healthscope.org)

**JCAHO (Joint Commission on Accreditation of Healthcare Organizations)**

Information on standards for hospitals

**1-800-994-6610**

[www.jcaho.org](http://www.jcaho.org)

**Notes:**

### Questions & Answers

**Q: I filled out an Advance Health Care Directive to say what care I want if I can't speak for myself. How can I make sure it's followed?**

**A:** Make sure it is signed and witnessed. Ask your doctor to put it in your medical file. Talk about it with your doctor and your family and closest friends. Make sure they will follow your wishes.

**Q: My father was in a coma for a week before he died. I had to decide about his care. Is there help for people in my situation?**

**A:** Some things are very hard to decide, especially if you are deciding for someone you love. Ask if the hospital has a counselor or doctor you can talk to about ethical and religious questions.

**W**ork closely with your doctor and HMO so that the care you or your loved one has in the last months and days of life is the best it can be. Your HMO offers services, such as hospice care and pain management, that can help you at a very hard time.

You can make choices ahead of time about your last days and your death. Do you want to be at home or in a hospital? What treatments do you want or not want? If you can no longer decide for yourself, who will decide on your care for you? Fill out an Advance Health Care Directive and talk to your doctor, family and close friends about your wishes.

© Sutter VNA/Hospice

#### Hospice Care

Lisa, a hospice volunteer, visits with Frank during his last days.



### My Son and I Had to Speak Up

"My husband was in terrible pain. We knew he had the right to more pain medication. We really had to speak up—but it worked, and his last weeks were peaceful."

## Hospice

Hospice care offers help for people who are dying. It provides emotional support, pain management and other services. HMOs must cover hospice care benefits.

In hospice, a nurse visits every day or two. She advises the family and helps with medications, bathing and other care. The nurse can also help the family deal with emotional stress and make the final arrangements when the patient dies. For more information, visit [www.calregistry.com](http://www.calregistry.com).

## things you can do

### Protect Your Wishes with an Advance Health Care Directive

This is a form that lets you say what kind of care you want and who will decide on your care if you no longer can. The form must be signed and witnessed. Give copies to your doctor, family and close friends. Talk to them about your wishes. To order a form, call **California Healthcare Association**.

### Pain Management

If an HMO plan covers prescription drugs, it must cover pain medications for people who are dying. Make sure your doctor orders enough pain medication.

### Different Kinds of Care

- Hospice care can be at home, in a hospital or in a nursing home. Family or friends may help.
- Ask your HMO about what nursing home care is covered. For more information on nursing home care, call **HICAP** or visit [www.calregistry.com](http://www.calregistry.com).
- Most HMOs cover only a few months of nursing home care. For information on long-term care, call **AARP** or **HICAP**.

### Help for Caregivers

Your HMO's hospice program can help you find extra support and deal with emotional stress. Your HMO may also have a social worker you can talk with. Call **Family Caregiver Alliance**.

## where to find help

### AARP

Information on health care and other issues for seniors

**1-800-424-3410** [www.aarp.org](http://www.aarp.org)

### California Healthcare Association

Free Advance Health Care Directive forms

**1-800-494-2001** [www.calhealth.org](http://www.calhealth.org)

### California Registry

Information on hospice care and long-term care

**1-800-777-7575** [www.calregistry.com](http://www.calregistry.com)

### Family Caregiver Alliance

Help for family caregivers

**1-800-445-8106** [www.caregiver.org](http://www.caregiver.org)

### HICAP (Health Insurance Counseling & Advocacy Program)

Information, counseling and advocacy for Medicare members

**1-800-434-0222**

# If You Have a Complaint

## Questions & Answers

### Q: What is a grievance?

**A:** It is a complaint. Your HMO may have a form you can use to file a grievance.

### Q: My doctor says I can't get a service that I think I need. Do I complain to my HMO or my doctor?

**A:** Ask your doctor why you can't get the service. If her reply does not answer your questions, file a complaint with your HMO. Send a copy to your doctor and your doctor's Medical Group.

### Q: I've read that many minorities don't get good care. This happened to me—my doctor didn't tell me all the things I could do for my diabetes. What can I do?

**A:** You can file a complaint with your HMO. If that does not help, see page 50.

#### Take Action

"My HMO wouldn't approve the tests Pat needed. So I got my doctor to write a letter, and I sent in a written complaint. We got the tests, and now we can make a better decision about Pat's care."

Kathy Sloane

**I**t can be hard to know what to do if you have a problem with your health care. You may feel overwhelmed, especially if you or someone you love is sick.

If you're not satisfied with your care, meet with your doctor and talk to your HMO's Member Services. Take notes and bring a

## How to File a Complaint with Your HMO

- 1** Ask your HMO **Member Services** to send you a complaint form.
- 2** Your HMO must take action within 30 days after it receives your complaint.
- 3** If your problem is urgent, ask for an Expedited Review. Your HMO must take action within 3 days.
- 4** If your HMO still won't help or doesn't reply within the time limit, see page 50 or call **HMO Help Center**.

## Speak Up for Yourself

- Take notes when you have a phone call or meeting.
- Get the name of the person you talk to.
- Have someone with you for extra support.
- If you are told you can't have the care you want, ask for the reason in writing.
- If the person you talk to isn't helpful, ask to speak to a supervisor.
- If different people tell you different things about the services you can get, ask to speak to a supervisor.

### Be Persistent

It may take many calls to get the services you need.



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## things you can do

### Call Your HMO Member Services First

If you have a problem, call your HMO's **Member Services**. You may be able to solve your problem with a phone call.

### Talk to Someone Who Can Help

- There are groups that can help you if you have a problem with your HMO. Call a local legal aid group or see page 54.
- If you have Medicare, you can get help from **HICAP**.
- If you have Medi-Cal, call **Medi-Cal Managed Care Ombudsman**.
- Your benefits office at work may be able to help you, too.

### You Have the Right to

- Be treated with courtesy and respect.
- Get quality health care in a timely manner.
- Get an appointment when you need one.
- Get care from qualified medical personnel.
- Choose a doctor you trust.
- Understand your health problem and the risks and benefits of your treatment choices.
- Get a second opinion.
- Choose or refuse treatment.

### What About Customer Service Problems?

If you're treated rudely, can't get the appointment you need or have to wait too long, ask to talk to a supervisor or call **Member Services**. If that doesn't help, file a complaint.

## where to find help

### HICAP (Health Insurance Counseling & Advocacy Program)

Information, counseling and advocacy for Medicare members

**1-800-434-0222**

### HMO Help Center

Help for California HMO members

**1-888-HMO-2219**

[www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)

### Medi-Cal Managed Care Ombudsman

Help with a problem you can't solve with your Medi-Cal HMO

**1-888-452-8609**

### Member Services

To find your HMO's phone number, see page 60

### Notes:

## Questions & Answers

### Q: What does the HMO Help Center do?

**A:** The HMO Help Center provides information and help to HMO members. Help is offered in many languages. The HMO Help Center is independent of all HMOs. It is part of the state Department of Managed Health Care.

### Q: How do I know if I should file a complaint with my HMO or with the HMO Help Center?

**A:** Usually it's best to file a written complaint with your HMO first. But if your problem is urgent, or you aren't sure, call **HMO Help Center**.

### Q: The complaint process seems to take so long. I need care now. What should I do?

**A:** Call **HMO Help Center** now and ask what you can do. You may need an expedited review to have your case handled in 3 days.

#### If You're Not Satisfied

"We were worried about Kenny's care. Our HMO didn't answer our letter. We called the HMO Help Center and got the help we needed."

**Y**ou can prevent many problems by understanding your benefits and working closely with your doctor and your HMO. If you're not satisfied with how your HMO responds to your problem, you can call the HMO Help Center.

The HMO Help Center is a toll-free help line for all California HMO members. You can call 24 hours a day, 7 days a week. The staff at the HMO Help Center can help you understand what you can do. They may be able to solve your problem with a few phone calls. If you need to file a complaint, they can help you.

Kathy Sloane



### How to File a Complaint with the HMO Help Center

- 1 Unless your problem is urgent, you usually need to file a complaint with your HMO first. See page 48.
- 2 If your HMO doesn't take action within 30 days or you still need help, you can file a complaint with the HMO Help Center.
- 3 To file a complaint, call **HMO Help Center**. To see a complaint form, visit [www.hmohelp.ca.gov](http://www.hmohelp.ca.gov).



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#### Finding Help

When Angela had a problem with her daughter's care, she found a local legal aid group that was able to help.

### What Happens After You File a Complaint

- 1 You will usually get a letter from the HMO Help Center that explains what was decided. You should get the letter in 30 days, or sooner if your problem is urgent.
- 2 If the complaint is decided in your favor, your HMO must pay for the treatment or other service.
- 3 If the complaint is not decided in your favor, the letter will tell you why.

## things you can do

### If You Need Help Right Away

If your problem is causing a serious or urgent threat to your health, such as not getting treatment for a life-threatening disease, call the **HMO Help Center**. Say that your problem is urgent.

### Find Other Groups That Can Help

Many of the resources listed in this guide can help you understand your rights and get better care. See page 56 for a full list. You can also call a local legal aid society.

### If You Have Medicare or Medi-Cal

Your complaint process is not the same. If you have Medicare, see page 19 or call **HICAP**. If you have Medi-Cal, see page 17 or call **Medi-Cal Managed Care Ombudsman**.

## where to find help

### HICAP (Health Insurance Counseling & Advocacy Program)

Information, counseling and advocacy for Medicare members

**1-800-434-0222**

### Medi-Cal Managed Care Ombudsman

Help with a problem you can't solve with your Medi-Cal HMO

**1-888-452-8609**

### HMO Help Center

Help for California HMO members



**1-888-HMO-2219**

[www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)

### Notes:

### Questions & Answers

**Q: How does the Independent Medical Review (IMR) decide if my HMO should pay for a treatment I want?**

**A:** The IMR looks at your medical needs to see if the treatment is necessary for your care. The kind of treatment you want must be covered by your benefit package.

**Q: My doctor recommends an experimental treatment, but my HMO won't cover it. How would the IMR make a decision?**

**A:** The IMR compares the treatment your HMO offers with the treatment your doctor thinks you should have, to see which is more likely to help you. Your benefit package must cover this general kind of treatment.

**Q: What happens if I win my appeal?**

**A:** Your HMO must pay for the service. Some cases are settled because the HMO agrees to give the medical care before the IMR is finished.

**Y**ou and your HMO may not agree about the care you need. Your HMO may say that the treatment you want is not needed for your health or is experimental and that they won't pay for it. Or you may have gotten emergency care that your HMO says it won't pay for.

If these things happen, you can ask for an Independent Medical Review, or IMR. California hires doctors to conduct these reviews. The doctors are experts on your health problem, but they are not part of your HMO. And they do not get money from your HMO.

#### We Asked for an IMR

Juan says, "When my plan stopped paying for my medicine, I called the HMO Help Center. They helped us get an IMR."



### I Wanted to Try a New Treatment for Prostate Cancer

“The IMR said that studies didn’t show that the treatment would work. So I am doing what my HMO recommended instead.”



© Kim Steel/Getty Images/PhotoDisc

### You Can Request a Review

- If you had emergency or urgent care and your HMO won’t pay for it.

**Or**

- If you asked for a service and your HMO says you don’t need it. You must file a written complaint with your HMO first and wait 30 days for a response. If your problem is urgent, you can call **HMO Help Center** now.

**Or**

- If you asked for experimental treatment for a serious health problem and your HMO won’t pay for it.

In general, the kind of service you ask for must be part of your benefits package. For example, if you don’t have prescription drug benefits, an experimental drug may not be covered.

## things you can do

### To Request an Independent Medical Review (IMR)

- Call **HMO Help Center**. The staff will help you with the review process. If your problem does not qualify for an IMR, they will tell you what else you can do. In some cases you must file a written complaint with your HMO first.
- If your problem is urgent, **HMO Help Center** will help you request a faster review.
- Your IMR must usually be decided within 30 days—or sooner if your problem is urgent. You do not attend the review.
- You must ask for a review within 6 months after your HMO denies your request.

### Read Summaries of the Decisions

Each Independent Medical Review decision is based on the person’s problem. Your name and medical records are not made public. You can read summaries of all IMR decisions. Visit [www.hmohelp.ca.gov](http://www.hmohelp.ca.gov).

### If You Have Medicare or Medi-Cal

Medicare has its own review process. See page 19 or call **HICAP**. If your Medi-Cal HMO denies the services you need, call **Medi-Cal Fair Hearing** or see page 17.

### If You’re Still Not Satisfied

You may be able to take further action. You have the right to sue if you’ve suffered serious bodily harm. HMO members usually resolve their cases through a process called binding arbitration. This process settles cases out of court. Before you take any action, talk to a lawyer. Visit [www.calpatientguide.org](http://www.calpatientguide.org).

## where to find help

### California Patient’s Guide

A guide to health care rights [www.calpatientguide.org](http://www.calpatientguide.org)

### HICAP (Health Insurance Counseling & Advocacy Program)

Information, counseling and advocacy for Medicare members

**1-800-434-0222**

### HMO Help Center

Help for California HMO members

**1-888-HMO-2219**

[www.hmohelp.ca.gov](http://www.hmohelp.ca.gov)

### Medi-Cal Fair Hearing

File an appeal if your HMO denies you the services you need

**1-800-952-5253**

**Notes:**



## Questions & Answers

### Q: What is the Office of the Patient Advocate?

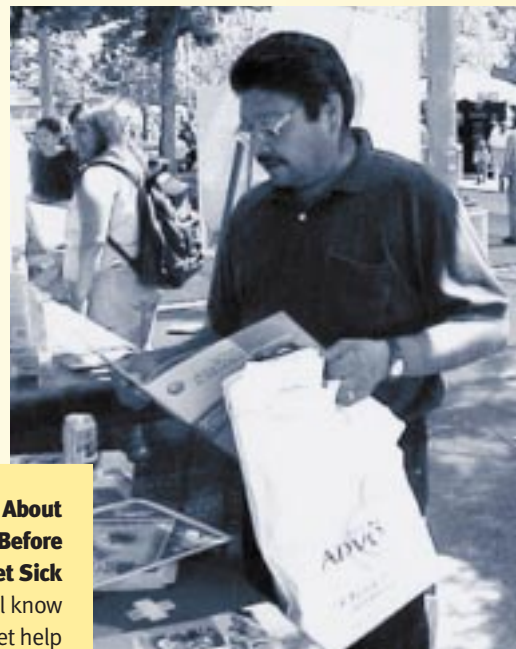
**A:** It is a state agency set up to inform HMO members about their rights.

### Q: I don't understand all the things I get in the mail from my HMO. What should I do?

**A:** Don't worry. You're not alone. If you don't understand something you get, call the **Member Services** phone number on your HMO membership card. Or ask your personnel office at work to explain your HMO.

**T**rying to choose and use an HMO can be difficult. There are many rules and it's hard to know what your rights are.

The Office of the Patient Advocate (OPA) is here to help guide you, so that you can get the care you need for yourself and your family.



Office of the Patient Advocate

### Learn About Your HMO Before You Get Sick

Then you'll know how to get help when you really need it.

HMO Quality					
HMO	Care for Staying Healthy	Care for Getting Better	Care for Living With Illness	Doctor Communication and Service	Plan Service
Aetna U.S. Healthcare	★	★	★★	★★	★★
Blue Cross HMO - CaliforniaCare	★	★	★★	★★	★★
Blue Shield of California	★	★★	★★	★★	★★
CIGNA HealthCare	★	★★	★★	★★	★★
Health Net	★	★★	★★	★★	★★★
Kaiser Permanente North	★★	★★★	★★	★★	★★★★
Kaiser Permanente South	★★	★★	★★	★★	★★★★
PacificCare of California	★★	★★	★★	★★	★★
Universal Care	★	★	★★	★★	★★
Western Health Advantage	Not willing to report			★★	★★
Ratings Key:    Excellent ★★★    Good ★★    Fair ★    Poor ☆					

### The Quality of Care Report Card

This page from the 2003–2004 Report Card tells how well HMOs care for their members. It also tells what members think about their HMOs.

## Choose an HMO That's Right for You

Use the *Quality of Care Report Card* to find out which HMO and Medical Group will best meet the needs of you and your family.

- Learn about HMO services in different languages.
- Learn how well HMOs serve people with chronic conditions like diabetes and heart disease.
- To order the latest report card, call the **Office of the Patient Advocate**.



**Find a Doctor  
Who Speaks  
Your Language**

Li chose an HMO after reading the *Quality of Care Report Card*. It tells about the services HMOs offer in different languages.



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Picturequest

## things you can do

**The Office of the Patient Advocate (OPA) Can Help You:**

- Learn about your HMO rights under California law.
- Learn how to use your HMO.
- Get the best quality of care.
- Find help when you have a problem with your HMO.

**OPA Offers Free Materials On HMOs:**

- *California's HMO Guide*, in English or Spanish
- The *Quality of Care Report Card* in English, Spanish and Chinese.
- Brochures on your right to health care, mental health care and other services, in English, Spanish and Chinese.

**Find Health Events in Your Community**

Each month there are many health fairs, conferences and other events to help people learn about their health care rights. View OPA's Calendar of Events at [www.opa.ca.gov](http://www.opa.ca.gov).

Call OPA for help setting up an event in your community. OPA can help you find information, speakers and other resources.

**OPA Helps People Get Better Health Care**

The Office of the Patient Advocate also does research to help people in California get better health care. You can read reports on this research at [www.opa.ca.gov](http://www.opa.ca.gov).

## where to find help

**Member Services**

To find your HMO's phone number, see page 60

**Office of the Patient Advocate (OPA)**

Information on California HMOs

**1-866-HMO-8900**

[www.opa.ca.gov](http://www.opa.ca.gov)

**Notes:**

### This is a list of all the phone numbers and websites in this guide.

- Most of these resources have people who can help you find information or solve a problem.
- If you are having trouble with a recorded message, stay on the line and someone will probably answer. Or try pressing “0”.
- If there’s no TTY, call **7-1-1**. If you have a speech disability, you can use the Speech-to-Speech Relay. Call **1-800-854-7784**.
- Not all websites are accessible to people with disabilities. If a site is not accessible, e-mail the webmaster.
- Toll-free phone numbers begin with **1-800**, **1-866**, **1-877** and **1-888**. Other phone numbers are not toll-free.

• means there is usually someone who speaks Spanish

Resource	Description	Voice	TTY	Website
<b>AARP</b>	Information on health care and other issues for seniors	<b>1-800-424-3410</b>	• <b>1-877-434-7598</b>	<b>www.aarp.org</b>
<b>Agency for Healthcare Research and Quality</b>	Information on choosing quality health care and Personal Health Guides to routine care	<b>1-800-358-9295</b>	• <b>1-888-586-6340</b>	<b>www.ahrq.gov</b>
<b>AIDS Drug Assistance Program</b>	Help paying for drugs to treat HIV/AIDS	<b>1-888-311-7632</b>	•	<b>www.ramsellcorp.com</b>
<b>AIM Program</b>	Low cost health insurance for pregnant women with low and middle incomes	<b>1-800-433-2611</b>	•	<b>www.mrmib.ca.gov</b>
<b>American Board of Medical Specialties</b>	Information about specialists’ training	<b>1-866-275-2267</b>		<b>www.abms.org</b>
<b>American College of Surgeons</b>	Information on common operations and choosing a surgeon	<b>1-312-202-5000</b>	•	<b>www.facs.org</b>
<b>Americans with Disabilities</b>	The rights of people with disabilities	<b>1-800-514-0301</b>	• <b>1-800-514-0383</b>	<b>www.ada.gov</b>
<b>AT Network</b>	Information on equipment and assistive technology	<b>1-800-390-2699</b>	• <b>1-800-900-0706</b>	<b>www.atnet.org</b>
<b>California Advocates for Nursing Home Reform</b>	Information and help for people living in a nursing home	<b>1-800-474-1116</b>	•	<b>www.canhr.org</b>
<b>California AIDS Hotline</b>	Information on HIV/AIDS services	<b>1-800-367-2437</b>	• <b>1-888-225-2437</b>	<b>www.sfaf.org</b>
<b>California Black Women’s Health Project</b>	Information on black women’s health; help for women in Los Angeles	<b>1-310-412-1828</b>		<b>www.cabwhp.org</b>
<b>California Foundation for Independent Living Centers</b>	Resources for people with disabilities	<b>1-916-325-1690</b>	<b>1-916-325-1695</b>	<b>www.cfilc.org</b>
<b>California Health Advocates</b>	Information on Medicare	<b>1-916-231-5110</b>		<b>www.cahealthadvocates.org</b>

• means there is usually someone who speaks Spanish

Resource	Description	Voice	TTY	Website
<b>California Healthcare Association</b>	Free Advance Health Care Directive forms	<b>1-800-494-2001</b>		<b>www.calhealth.org</b>
<b>California Health Decisions</b>	Tips for using health care services	<b>1-714-347-7921</b>		<b>www.cahd.org</b>
<b>California Internet Formulary</b>	Information on drug formularies			<b>http://ca.mcodrugs.com</b>
<b>California Medical Review</b>	Medicare HMO quality of care problems	<b>1-800-841-1602</b>	• <b>1-800-881-5980</b>	<b>www.cmri-ca.org</b>
<b>California Network of Mental Health Clients</b>	Peer support for mental health clients	<b>1-800-626-7447</b>		<b>www.cnmhc.org</b>
<b>California Office of Patients' Rights</b>	Advocacy for patients hospitalized with mental illness	<b>1-916-575-1610</b>	•	<b>www.pai-ca.org</b>
<b>California Patient's Guide</b>	A guide to health care rights			<b>www.calpatientguide.org</b>
<b>California Registry</b>	Information on hospice and long-term care	<b>1-800-777-7575</b>		<b>www.calregistry.com</b>
<b>Cal Medicare (California HealthCare Foundation)</b>	Printed information for Medicare members	<b>1-888-430-2423</b>	•	<b>www.calmedicare.org</b>
<b>Cancer Information</b>	Information on cancer treatments	<b>1-800-422-6237</b>	• <b>1-800-332-8615</b>	<b>www.cancer.gov</b>
<b>Center for Health Care Rights</b>	General information about rights and help for people in Los Angeles County	<b>1-800-824-0780</b>	•	<b>www.healthcarerights.org</b>
<b>Centers for Medicare and Medicaid Services (CMS)</b>	Information on Medicare, Medicaid and HIPAA	<b>1-877-267-2323</b>	<b>1-866-266-1819</b>	<b>http://cms.hhs.gov</b>
<b>Childbirth</b>	Information on pregnancy and childbirth			<b>www.childbirth.org</b>
<b>Deaf Counseling, Advocacy and Referral Agency</b>	Resources for people who are Deaf or Hard of Hearing	<b>1-877-322-7299</b>	<b>1-877-322-7288</b>	<b>www.dcara.org</b>
<b>Department of Insurance</b>	Information and help for consumers	<b>1-800-927-4357</b>	• <b>1-800-482-4833</b>	<b>www.insurance.ca.gov</b>
<b>Department of Managed Health Care</b>	Information and help for California HMO members	<b>1-888-HMO-2219</b>	• <b>1-877-688-9891</b>	<b>www.hmohelp.ca.gov</b>
<b>Disability Rights Advocates</b>	A guide to the health care rights of people with disabilities	<b>1-888-926-0274</b>	<b>1-510-451-8716</b>	<b>www.dralegal.org</b>

• means there is usually someone who speaks Spanish

Resource	Description	Voice	TTY	Website
<b>Families USA</b>	National advocacy for health care consumers			<a href="http://www.familiesusa.org">www.familiesusa.org</a>
<b>Family Caregiver Alliance</b>	Information and help for family caregivers	<b>1-800-445-8106</b>		<a href="http://www.caregiver.org">www.caregiver.org</a>
<b>Family Voices</b>	Health care advocacy for children with disabilities	<b>1-888-835-5669</b>	•	<a href="http://www.familyvoices.org">www.familyvoices.org</a>
<b>Food and Drug Administration</b>	Information on medicines and equipment	<b>1-888-463-6332</b>		<a href="http://www.fda.gov">www.fda.gov</a>
<b>Health Care Options</b>	Joining or leaving a Medi-Cal HMO	<b>1-800-430-4263</b>	• <b>1-800-430-7077</b>	
<b>Health Choices</b>	Information on choosing a health plan			<a href="http://www.healthchoices.org">www.healthchoices.org</a>
<b>Health Consumer</b>	Health care information in several languages			<a href="http://www.healthconsumer.org">www.healthconsumer.org</a>
<b>Healthfinder</b>	An introduction to health information on the Web			<a href="http://www.healthfinder.gov">www.healthfinder.gov</a>
<b>Health Rights Hotline</b>	Hotline for Sacramento, Placer, Yolo and El Dorado counties	<b>1-888-354-4474</b>	•	<a href="http://www.hrh.org">www.hrh.org</a>
<b>HealthScope</b>	Information on health plans, Medical Groups and hospitals in California			<a href="http://www.healthscope.org">www.healthscope.org</a>
<b>Healthy Families</b>	Health insurance for low/middle-income families	<b>1-800-880-5305</b>	• <b>1-800-735-2929</b>	<a href="http://www.healthyfamilies.ca.gov">www.healthyfamilies.ca.gov</a>
<b>HICAP</b>	Information, counseling and advocacy for Medicare members	<b>1-800-434-0222</b>	•	
<b>HMO Help Center</b>	Information and help for California HMO members	<b>1-888-HMO-2219</b>	• <b>1-877-688-9891</b>	<a href="http://www.hmohelp.ca.gov">www.hmohelp.ca.gov</a>
<b>Joint Commission on Accreditation of Healthcare Organizations (JCAHO)</b>	Information on health care standards and filing complaints	<b>1-800-994-6610</b>		<a href="http://www.jcaho.org">www.jcaho.org</a>
<b>KidsHealth</b>	Information on children's health			<a href="http://www.kidshealth.org">www.kidshealth.org</a>
<b>Lab Tests Online</b>	Information about lab tests			<a href="http://www.labtestsonline.org">www.labtestsonline.org</a>
<b>Medi-Cal Fair Hearing (Department of Social Services)</b>	File an appeal if your Medi-Cal HMO denies you the services you need	<b>1-800-952-5253</b>	•	



• means there is usually someone who speaks Spanish

Resource	Description	Voice	TTY	Website
<b>Medi-Cal Managed Care Ombudsman</b>	Help with a problem you can't solve with your Medi-Cal HMO	<b>1-888-452-8609</b>	•	
<b>Medi-Cal Mental Health Care Ombudsman</b>	Information and help with Medi-Cal mental health care services	<b>1-800-896-4042</b>	• <b>1-800-896-2512</b>	
<b>Medicare (1-800-Medicare)</b>	Information and help with Medicare and nursing home care	<b>1-800-633-4227</b>	• <b>1-877-486-2048</b>	<a href="http://www.medicare.gov">www.medicare.gov</a>
<b>Medline Plus</b>	Health information from the National Library of Medicine			<a href="http://www.medlineplus.gov">www.medlineplus.gov</a>
<b>National Committee for Quality Assurance (NCQA)</b>	Information on quality health care and HMO standards	<b>1-800-839-6487</b>		<a href="http://www.ncqa.org">www.ncqa.org</a>
<b>National Guideline Clearinghouse</b>	Care guidelines for many health conditions			<a href="http://www.guideline.gov">www.guideline.gov</a>
<b>National Immunization Hotline</b>	Immunization guidelines	<b>1-800-232-2522</b>	• <b>1-800-243-7889</b>	<a href="http://www.cdc.gov/nip">www.cdc.gov/nip</a>
<b>National Institute on Aging</b>	Information for seniors	<b>1-800-222-2225</b>	• <b>1-800-222-4225</b>	<a href="http://www.nia.nih.gov">www.nia.nih.gov</a>
<b>National Institutes of Health</b>	Information on many health issues			<a href="http://www.health.nih.gov">www.health.nih.gov</a>
<b>National Mental Health Association</b>	Information, advocacy and referrals for adults and children	<b>1-800-969-6642</b>	• <b>1-800-433-5959</b>	<a href="http://www.nmha.org">www.nmha.org</a>
<b>Office of the Patient Advocate</b>	Report cards with information on California HMOs	<b>1-866-466-8900</b>	•	<a href="http://www.opa.ca.gov">www.opa.ca.gov</a>
<b>Poison Action Line</b>	Emergency help for victims of poisoning	<b>1-800-876-4766</b>	• <b>1-800-972-3323</b>	<a href="http://www.calpoison.org">www.calpoison.org</a>
<b>Protection &amp; Advocacy</b>	Legal advocacy for people with disabilities	<b>1-800-776-5746</b>	• <b>1-800-649-0154</b>	<a href="http://www.pai-ca.org">www.pai-ca.org</a>
<b>Senior Information and Referral</b>	Information about local services for seniors	<b>1-800-510-2020</b>		
<b>Talking with Kids</b>	Order a booklet on talking with kids and teens about sex, violence, AIDS and drugs	<b>1-800-244-5344</b>	•	<a href="http://www.talkingwithkids.org">www.talkingwithkids.org</a>
<b>U.S. Dept. of Labor, Employee Benefits Security Administration</b>	Information about COBRA and HIPAA	<b>1-866-444-3272</b>	• <b>1-877-889-5627</b>	<a href="http://www.dol.gov/ebsa">www.dol.gov/ebsa</a>

### Look for your HMO's Member Services phone number on this list or on your membership card.

- If you do not speak English, ask if you can speak to someone in your language or use a language line. See page 28.
- If your HMO does not have a TTY, you can use the Deaf Relay service. Call **7-1-1**.
- If you have a speech disability, you can use the Speech-to-Speech Relay service. Call **1-800-854-7784**.

### Call your member services for general assistance and answers to your questions.

- Ask questions about billing.
- Get a copy of your Evidence of Coverage or Summary of Benefits. See page 30.
- Ask about health care outside your HMO's service area.
- Get a copy of the HMO formulary. See page 38.
- File a complaint or grievance. See page 48.
- Get help with access to care for people with disabilities. See page 26.
- Add or remove family members from coverage.
- Get a replacement copy of your membership card.
- Tell your HMO when your address or phone number changes.
- Get help finding an interpreter. See page 28.

HMO	Phone	TTY	Website
<b>Aetna US Healthcare of California</b>	<b>1-800-756-7039</b>	<b>1-800-628-3323</b>	<b>www.aetna.com</b>
<b>Alameda Alliance for Health</b>	<b>1-877-932-2738</b>	<b>1-510-747-4501</b>	<b>www.alamedaalliance.com</b>
<b>Blue Cross of California:</b>			
<b>General</b>	<b>Call 800 # on ID Card</b>	<b>1-800-735-2922</b>	<b>www.bluecrossca.com</b>
<b>Individual Plans</b>	<b>1-800-333-0912</b>	<b>1-800-735-2922</b>	<b>www.bluecrossca.com</b>
<b>Large Groups</b>	<b>1-800-999-3643</b>	<b>1-800-735-2922</b>	<b>www.bluecrossca.com</b>
<b>Senior Services</b>	<b>1-800-333-3883</b>	<b>1-800-735-2922</b>	<b>www.bluecrossca.com</b>
<b>Small Groups</b>	<b>1-800-627-8797</b>	<b>1-800-735-2922</b>	<b>www.bluecrossca.com</b>
<b>Blue Shield of California</b>	<b>1-800-200-3242</b>	<b>1-800-241-1823</b>	<b>www.blueshieldca.com</b>
<b>CalOptima</b>	<b>1-888-587-8088</b>		<b>www.caloptima.org</b>
<b>Care 1st Health Plan</b>	<b>1-800-605-2556</b>	<b>1-800-735-2929</b>	<b>www.care1st.com</b>

HMO	Phone	TTY	Website
Central Coast Alliance for Health	1-800-700-3874	1-877-548-0857	www.ccah-alliance.org
Chinese Community Health Plan	1-415-834-2118	1-877-681-8888	www.cchphmo.com
Cigna HealthCare of California, Inc.	1-800-344-0557	1-800-321-9545	www.cigna.com
Community Health Group	1-888-244-4430	1-800-735-2922	www.chgsd.com
Contra Costa Health Plan	1-877-661-6230		
County of Los Angeles Community Health Plan	1-800-475-5550	1-626-299-7265	http://ladhs.org/chp
Health Net:			
Large Groups	1-800-522-0088	1-800-995-0852	www.healthnet.com
Small Groups	1-800-361-3366	1-800-995-0852	www.healthnet.com
Select	1-800-676-6976	1-800-995-0852	www.healthnet.com
Seniority Plus	1-800-275-4737	1-800-929-9955	www.healthnet.com
Health Plan of San Joaquin	1-800-932-7526	1-209-942-6306	www.hpsj.com
Health Plan of San Mateo	1-800-750-4776	1-650-616-8037	www.hpsm.org
Inland Empire Health Plan	1-800-440-4347	1-909-890-0731	www.iehp.org
Inter Valley Health Plan	1-800-251-8191	1-800-505-7150	www.ivhp.com
Kaiser Permanente	1-800-464-4000	1-800-777-1370	www.kaiserpermanente.org
L.A. Care Health Plan	1-888-452-2273		www.lacare.org
Molina Healthcare of California	1-888-665-4621	1-562-951-1541	www.molinahealthcare.com
NAMM California	1-800-864-7500		www.nammcal.com

HMO	Phone	TTY	Website
One Health Plan of California, Inc.	1-800-663-8081		www.onehealthplan.com
On Lok Senior Health Services	1-415-292-8888		www.onlok.org
PacifiCare of California:			
General	1-800-624-8822	1-800-442-8833	www.pacificare.com
Secure Horizons	1-800-228-2144		www.securehorizons.com
San Francisco Health Plan	1-800-288-5555		www.sfhfp.org
Santa Barbara Regional Health Authority	1-877-814-1861		www.sbrha.org
Santa Clara County Valley Health Plan	1-408-885-4760		www.scvmed.org
Santa Clara Family Health Plan	1-800-260-2055	1-800-567-7759	www.scfhp.com
Scan Health Plan	1-800-559-3500		www.scanhealthplan.com
Scripps Clinic Health Plan Services, Inc.	1-888-680-2273		www.scrippscclinic.com
Sharp Health Plan	1-800-359-2002		www.sharp.com
Sistemas Médicos Nacionales S.A. (SIMNSA)	1-800-424-4652		www.simnsa.com
Turtle Health Plan	1-888-887-8538		www.turtlehealth.org
UHP Healthcare	1-800-544-0088	1-888-702-3323	www.uhphealthcare.com
Universal Care	1-800-635-6668		www.universalcare.com
University of California, San Diego Health Plan	1-800-688-6161		www.health.ucsd.edu
Ventura County Health Plan	1-800-600-8247	1-800-735-2929	www.vchca.org/hcp
Western Health Advantage	1-888-563-2250	1-888-877-5378	www.westernhealth.com



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